

City of Northville  
City Clerk's Office  
215 W. Main Street  
Northville, MI 48167  
248-349-1300



## Application for Public Dance Facility, Roller Skating Facility, Bar or Restaurant with Dance Facility Permit

Application for permit for above in Accordance with Chapter 6, Article IV of the City of Northville Code of Ordinances

**Bar or restaurant with dancing facility** means a public dancing facility which is ancillary to the bar and/or restaurant operation, which is operated for the use of the customers of the bar or restaurant, and does not constitute more than ten percent of the total floor area of the bar or restaurant as established under the city occupancy permit.

**Operator** means anyone operating a public dance facility and/or a roller skating facility, or a bar or restaurant with dancing facility, including any lessee or manager. In the case of an unincorporated club, partnership or association, a member thereof shall be specifically designated by such organization as the operator for purposes of this article.

**Public dance facility or roller skating facility** means any room, place or space in which a public dance or public ball or roller skating shall occur, or any room, place or space to which the public generally may gain admission with or without payment of a fee, where dancing and/or roller skating are permitted, either on an organized or unorganized basis, but shall not include dances or roller skating if exempt under section 6-142 (see section 6-142 of the Code of Ordinances for further information).

Application Date \_\_\_\_\_ Initial \$108  Annual Renewal \$53  Late Renewal \$80   
(before 6/30) (after 6/30)

Business Name \_\_\_\_\_ Business Phone \_\_\_\_\_

Address \_\_\_\_\_  
Number and Street City State Zip Code

Owner Name \_\_\_\_\_ Phone \_\_\_\_\_

Owner Address \_\_\_\_\_  
Number and Street City State Zip Code

Have you been convicted of a felony or crime involving moral turpitude? \_\_\_\_\_ If yes, attach a separate statement describing the circumstances.

**Check One: Business is**

Individual  Partnership  Corporation  Firm  Association Owner Position \_\_\_\_\_

If unincorporated club, partnership or association, a member thereof shall be specifically designated as the operator.

Operator Name \_\_\_\_\_ Phone \_\_\_\_\_

Operator Address \_\_\_\_\_  
Number and Street City State Zip Code

Has the operator been convicted of a felony or crime involving moral turpitude? \_\_\_\_\_ If yes, attach a separate statement describing the circumstances.

**CONTINUE ON NEXT PAGE**

**DESCRIPTION OF FACILITY AND PROPOSED METHOD OF OPERATION**

Proposed days and hours of operation \_\_\_\_\_

**Sec. 6-139. Hours.** No dancing or roller skating shall be permitted and no public dance facility or roller skating facility shall operate between the hours of 1:00 a.m. and 8:00 a.m., without first having obtained permission from the city council upon the recommendation of the chief of police. No bar or restaurant with dancing facility shall permit customers to dance except during the hours 9:00 p.m. to 2:00 a.m. on Monday through Saturday, nor at any time on Sunday after 2:00 a.m.

Provide a specific description of the facility and the proposed method of operation (you may attach a separate sheet containing this information). If this is a renewal request, describe any changes.

**STATEMENT OF OWNER**

- I have read and I am familiar with the City of Northville Ordinance pertaining to Public Dance Facility; Roller Skating Facility; Bar or Restaurant with Dance Facility (Chapter 6, Article IV, of the City of Northville Code of Ordinances).
- I have included a copy of my driver’s license or state identification card to this application
- I have attached a copy of the operators driver’s license or state identification card to this application.
- I understand that upon City Council approval, I must pay the required fee prior to receiving a license.

I hereby affirm that the above information is complete and correct to the best of my knowledge and belief.

STATE OF MICHIGAN)
COUNTY OF \_\_\_\_\_ )

\_\_\_\_\_  
Signature and Title of **Owner**

Subscribed and sworn to before me, a Notary Public in and for \_\_\_\_\_ County, Michigan, this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_ .

\_\_\_\_\_  
Notary Public  
My Commission Expires \_\_\_\_\_

**OFFICE USE ONLY: (renewal requires police department authorization)**

Application Received \_\_\_\_\_

Department Routing Start Date \_\_\_\_\_

**Police Department** Date application received by department \_\_\_\_\_

**Written Determination attached. (SEE SECTION 6-153)**

Signature \_\_\_\_\_

Date forwarded \_\_\_\_\_

**Fire Department** Date application received by department \_\_\_\_\_

**Written Determination attached. (SEE SECTION 6-153)**

Signature \_\_\_\_\_

Date forwarded \_\_\_\_\_

**Building Department** Date application received by department \_\_\_\_\_

**Written Determination attached. (SEE SECTION 6-153)**

Signature \_\_\_\_\_

Date forwarded \_\_\_\_\_

**City Council** (*renewal does not require city council approval*)

Meeting Date \_\_\_\_\_ Applicant Notified \_\_\_\_\_

Application  Approved  Disapproved

Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Fee Paid \_\_\_\_\_ (fee is prorated)

Permit Date \_\_\_\_\_

Expiration Date **June 30,** \_\_\_\_\_

**CASHIER'S VALIDATION**