



# Restaurant, Bakery, Banquet, and other Food Establishments Application

Please mail completed form & fees to:  
Livonia City Clerk  
33000 Civic Center Drive, Livonia, MI 48154-3097

Make checks payable to 'City of Livonia'  
Phone: (734) 466-2228

Full Name \_\_\_\_\_  
  First  Middle  Last

Home Address \_\_\_\_\_  
  Address  City  State  Zip

Phone \_\_\_\_\_ **E-mail** \_\_\_\_\_

Business Name \_\_\_\_\_  
(as it should appear on license)

Location of Business \_\_\_\_\_  
  Address  City  State  Zip

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

Preferred Mailing Address \_\_\_\_\_

**\*License always expires on November 30<sup>th</sup> every year**

**Fee:** \$25

- Itinerant restaurant/Transient food vendor (limited to 7-day period) - \$15

- If itinerant restaurant, please include name & date of event:

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_