



Application for Lawn Service License

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

Type of Business Sole Proprietor Corporation Partnership LLC Other _____

Owner/Applicant _____
First Middle Last

Home Address _____
Address City State Zip

Phone Number _____ E-mail _____

Driver License No _____ Date of Birth _____

Business Name _____

Business Phone Number _____

Business Location _____
Address City State Zip

Mailing Address _____
Address City State Zip

Services Offered:

- Lawn Spraying Grass Cutting Landscape Planting or Transplanting
 Leaf Removal Sprinklers Sodding or Hydro Seeding

Pursuant to Ordinance No. 1688, Section 12.24.090, no person shall engage in the business of maintaining, planting, transplanting, or spraying of landscaping or lawns without the required City of Livonia license. The annual fee for this license is \$10. Submitting the application and paying the required license fee does not entitle the applicant to begin business operations until the license has been issued and in your possession.

I hereby certify that the foregoing is, to the best of my knowledge and belief, true and correct. I further understand and agree that any misrepresentation of any information on this application may be grounds for denial of a license. Any violation of the laws of the state of Michigan, or the ordinances of the City of Livonia, Michigan, can result in denial of this application, or revocation of my license. I shall hold the City harmless in case of any accident or on account of any danger arising from exercise of the license.

Signature _____ Date _____