



Fee: <u>\$1,002</u>
Date Rec'd: _____
Application #: _____
Meeting Date: _____

City of Flint
Planning & Zoning Department
1101 S Saginaw Street Room S105, Flint, MI 48502
Phone: (810)766-7426
www.cityofflint.com/department/planning-and-zoning/

Application for Street Name Change

Property Address & Parcel ID Numbers	Property or Street Address:	
	Parcel I.D. Number(s):	
Zoning District:		

Project Description			
	Does project involve Specially Designated Merchant License, Specially Designated Distributor License, or other liquor license?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant <i>(Must have a legal interest in the property)</i>	Name:				
	Firm:				
	Address:				
	City:				
	State:		Zip Code:		
	Phone:		Email:		
	<input type="checkbox"/> Own the property				
	<input type="checkbox"/> Lease the property, if so what is term of lease?		Years:	W/ options? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Have offer to purchase property (attach purchase agreement)				
	<input type="checkbox"/> Other property interest: (e.g., architect, attorney, contractor, etc.)				
Applicant Signature:					

Primary Contact <input type="checkbox"/> Same as applicant	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	Relationship to Applicant (e.g., architect, attorney, contractor, etc.)			
Property Owner <input type="checkbox"/> Same as applicant	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	Relationship to Applicant (e.g., architect, attorney, contractor, etc.)			

Please note:

The non-refundable fee made payable to the City of Flint must accompany your application.