



Dear Property Owners and Business Owners:

This letter is both to inform and remind you of Canton Township's Certificate of Occupancy and Re-Occupancy Programs and Policies. The past few years have seen a resurgence in business and homes as our community continues to grow and move forward. In Canton, we value your business and property ownership as a vital part of our growing community. Our goal is to provide safe and well-maintained businesses for our citizens, as well as for the patrons from other communities that Canton businesses attract.

Canton Township Ordinances require a current Zoning Compliance Certificate and a Certificate of Occupancy for the specific tenant/business owner and the use for which the space is occupied. As a Building Owner or a Business Owner, if there is no current Certificate of Occupancy in the business and business owners name that occupies the building or space, you are both in violation of the Township Ordinances and are subject to prosecution as laid out in the Township Ordinances. The Building Owner can also be held responsible for allowing a tenant to occupy a building or space under his/her control without a valid Certificate of Occupancy.

The process to obtain a Certificate of Occupancy starts with first obtaining a Zoning Compliance Certificate from Canton's Planning Services Division, who verifies the Zoning Compliance for that business. Once the approval has been obtained, the Business Owner needs to apply for a Re-Occupancy Permit at Canton's Building and Inspection Services Division. The Business Owner must present a copy of the Zoning Compliance Certificate at the time of the Re-Occupancy Permit application. A heating/cooling and ventilation system certification is required to be completed by a licensed Heating and Cooling Contractor prior to applying for a Re-Occupancy Permit. You can download the standard from for the certification online at www.canton-mi.org or pick one up at the Building and Inspection Services Division counter, located on the second floor of Canton's Administration Building. Once the Re-Occupancy Permit is applied for, your new occupancy/business will be jointly inspected by a Building Inspector and Fire Inspector, at your business' location within 48 hours (2 business days). Each inspector will leave a Field Report at the site at the end of the inspection that indicates all the requirements that must be complied with in order to receive a Certificate of Occupancy.

Thank you for taking the time to read this information. If we can be of further assistance in helping you open your business in Canton, please do not hesitate to contact Kristen Thomas, Canton Economic Development Manager at 734/394-5229 or email her at Kristen.thomas@canton-mi.org.

Sincerely,
Robert Creamer
Canton Township Building Official

Building & Inspection Services
734/394-5200
Planning Services
734/394-5170

DEPARTMENT OF MUNICIPAL SERVICES
1150 Canton Center S.
Canton, MI 48188-1699
www.canton-mi.org
734/394-5160

Engineering Services
734/394-5150
Public Works
734/397-1011



NEW BUILDINGS & ADDITIONS



EXISTING BUILDINGS ALTERATIONS /REMODELS



EXISTING BUILDINGS RE-OCCUPANCY NEW TENANT CHANGE OF OWNERSHIP NAME CHANGE ONLY



<p>BEGIN PRELIMINARY SITE PLAN REVIEW Visit the Planning and Zoning Department (2nd Floor)</p>	<p>SUBMIT BUILDING PERMIT APPLICATION OR REVISED PLANS</p>	<p>OBTAIN ZONING COMPLIANCE CERTIFICATE Visit the Planning and Zoning Department (2nd Floor)</p>
<p>BOARDS AND COMMISSION APPROVALS (if applicable)</p>	<p>15 BUSINESS DAY REVIEW</p>	<p>COMPLETE RE-OCCUPANCY INSPECTION APPLICATION HEAT CERT REQUIRED (more than 1 yr old) Visit Building & Inspection Services (2nd Floor) *Form available on Building Dept. webpage*</p>
<p>OBTAIN SITE PLAN APPROVAL</p>	<p>STATUS VISIBLE WITH ONLINE PORTAL *Link available on Building Dept. webpage*</p>	<p>SCHEDULE RE-OCCUPANCY INSPECTION (SAME DAY : FIRE & BLDG)</p>
<p>REQUEST BUILDING ADDRESS (NEW BLDGS) Visit the Planning and Zoning Department</p>	<p>APPROVAL or REQUEST FOR REVISION NOTIFICATION SENT VIA EMAIL TO APPLICANT</p>	<p>IF PLANS ARE REQUIRED, see SUBMIT PERMIT APPLICATION</p>
<p>SUBMIT FOR CIVIL ENGINEERING REVIEW Visit Engineering Department (2nd Floor) Eng Review may run concurrent with Building Permit Review</p>	<p>PERMIT IS READY TO ISSUE OR RE-SUBMIT REVISED PLANS</p>	<p>INSPECTION REPORT PROVIDED TO APPLICANT</p>
<p>SUBMIT BUILDING PERMIT APPLICATION *Submittal requirements available on our Building Dept. webpage</p>	<p>COMPLETE ANY CORRECTIONS AND SCHEDULE RE-INSPECTION</p>	<p>CERTIFICATE OF OCCUPANCY ISSUED</p>
<p>15 BUSINESS DAY REVIEW</p>	<p>STATUS VISIBLE WITH ONLINE PORTAL *Link available on Building Dept. webpage</p>	<p>CANTON TOWNSHIP WEBPAGE http://www.canton-mi.org</p>
<p>REQUEST FOR REVISION OR APPROVAL NOTIFICATION SENT VIA EMAIL</p>	<p>PERMIT IS READY TO ISSUE Trade and sign permits are separate</p>	<p>*DEPARTMENT WEBPAGE* http://www.canton-mi.org/190/Building-Inspection-Services</p>

BUILDING & INSPECTION SERVICES

COMMERCIAL PERMIT & PLAN REVIEW PROCESS



G:\BUILDING\BIS HANDOUTS\COMMERCIAL

Re-Occupancy Permit Application

CHARTER TOWNSHIP OF CANTON
DEPARTMENT OF MUNICIPAL SERVICES
BUILDING & INSPECTION SERVICES

Check #: _____ Permit #: _____

I. IDENTIFICATION

Permit Applicant _____ Phone _____

Mailing Address _____ City/State/Zip _____

E-mail Address _____

2. Property Owner _____ Phone _____

Mailing Address _____ City/State/Zip _____

E-mail Address _____

II. LOCATION OF REOCCUPANCY

Address _____ Canton, MI Zip _____

Business Name _____ Phone _____

Zoning District _____ Suite _____

III. TYPE OF REOCCUPANCY

A. Type of Improvement: **RE-OCCUPANCY**

Use (check one)

Commercial No. of Tenant Spaces:

Industrial No. of Tenant Spaces:

Residential Apartment (multiple units):

Describe in detail the proposed use of the structure/building:

Re-Occupancy Permit Application Page 2

IV. VALIDATION

Applicant's Signature _____ Date _____

Printed Name _____

Certificate of Occupancy Information:

If applicable, please provide the required information for your Certificate of Occupancy:

Business Name: _____

Business Owner Name, Address, Phone Number and Email:

Emergency Contact Name, Address, Phone Number and Email:

** The Building Division will communicate with the emergency contact regarding an immediate building issue or to update information as needed.*



**COMMERCIAL RE-OCCUPANCY
INSPECTION PROGRAM
HEAT CERTIFICATE**

Property Address: _____

Contractor Information: Name: _____

Phone# _____ Address: _____

State License: _____ Certification Categories: _____

Canton Registration Number: _____

Furnace Brand Name: _____ Year Built: _____

Model # _____ Serial # _____

C.O. TEST RESULT: _____ PPM

CERTIFIED YES NO

By checking yes, I certify that all safety controls have been checked and tested, and the entire system has been thoroughly inspected and is operating in a safe efficient manner.

A separate certificate is required for each system.

Signature of Company Representative: _____ Date: _____