



SEASONAL OUTDOOR SEATING APPLICATION

City of Novi Community Development Department

45175 W. Ten Mile, Novi, MI 48375

248.347.0475; 248.735.5633 fax

www.cityofnovi.org

Project Name

APPLICANT

Company		Primary Contact		Professional License Number, if applicable	
Street Address		Suite	City		State Zip
Phone Number		Fax Number		E-mail address	

ARCHITECT

Architectural Firm		Primary Architect		Professional License Number, if applicable	
Street Address		Suite	City		State Zip
Phone Number		Fax Number		E-mail address	

OWNER

Project Name		Legal Name of Ownership, with Primary Contact			
Street Address		Suite	City		State Zip
Phone Number		Fax Number		E-mail address	

PROJECT INFORMATION

Property Address, if known		North or South of which road?		East or West of which road?	
Parcel Number(s) (Contact Assessing Dept. if unknown)	Section	Approximate Square footage of proposed Outdoor Seating Area			
Space for additional information, if necessary					

SUBMITTAL REQUIREMENTS

Submittal Requirements:

- Four folded sets of plans which includes the overall site plan with proposed outdoor seating area. Size of plans must be 24" x 36", maximum scale of 1" = 50'.
- Original signed copy of this application.
- Notarized original signature of Landowner authorizing permission, if Applicant is not the owner.
- Completed checklist.
- Review Fee of \$400, check made payable to the City of Novi.

