



CITY OF DEARBORN

Home Town of Henry Ford

Economic and Community Development Department
Commercial Services Division

APPLICATION FOR COMMERCIAL PROPERTY CHANGE IN OWNERSHIP

The City of Dearborn requires that a closing Certificate of Occupancy be obtained prior to any Commercial property changes in ownership. (Ordinance 11-43).

An application must be completed by the person buying the property AND the current property owner. In both cases, the application must be signed in front of a licensed notary.

Application Checklist

- Completed Application
- Copy of Purchasers Drivers License
- Copy of Sellers Drivers License
- Proof of Current Property Ownership (Copy of Deed) may be required IF the name on record does not match your application
- Check or Money Order For the applicable fee made payable to
THE CITY OF DEARBORN for \$40.00

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED OR

PLEASE BE AWARE: THE CITY OF DEARBORN DOES NOT REQUIRE A PRE-SALE INSEPTION OF YOUR COMMERCIAL PROPERTY. ALL INSPECTIONS TAKE PLACE AFTER THE PROPERTY IS PURCHASED.

IF YOU HAVE QUESTIONS OR CONCERNS REGARDINGTHE APPLICATION, PLEASE CONTACT THE DEPARTMENT SPECIALIST, AT (313) 943-2421

IMPORTANT! PLEASE READ! ALL REQUIREMENTS MUST BE MET!

- ⇒ *Applicant must correctly fill in all blanks, please type when possible or print legibly in ink*
- ⇒ *The current property owner must sign the form , provide a COPY OF THEIR DRIVERS LICENSE AND PROOF OF OWNERSHIP (copy of a tax bill or deed) and have their signature notarized*
- ⇒ *The applicant must sign the form, and have their signature notarized*
- ⇒ *Note: a copy of the applicants drivers license will be taken when application is accepted*
- ⇒ *Your payment must be in the form of a check and made to the CITY OF DEARBORN for \$40.00*

Incomplete applications will NOT be ACCEPTED OR PROCESSED

Your Certificate of Occupancy for Closing should be ready on the **5th business day** after your application is accepted

**COMMERCIAL SERVICES
(313) 943-2421**

Case # _____

APPLICATION FOR COMMERCIAL PROPERTY TRANSFER (CHANGE IN OWNERSHIP)

This application must be used for any change in property owner. This application serves as the intent of the applicant to make inquiries at the proposed business address listed. This application is relevant to the applicant and proposed property transfer only.

BUILDING INFORMATION:

Today's Date _____ Square Footage of Building: _____ ft.
Address of Building: _____ DEARBORN, ZIP CODE _____
Parcel I.D. # _____
Once purchased, what is the proposed use of building? _____
What was the previous use? _____
Number of On Site Parking Spaces? _____ Current Zoning _____
Is The Building Currently Vacant? Yes / No Is this a Temporary Use? Yes / No

Name to call to pick up C of O: _____ **Phone Number:** _____

APPLICANT INFORMATION (PROPERTY PURCHSER):

NOTE: A COPY OF YOUR DRIVERS LICENSE MUST ACCOMPANY THIS APPLICATION

New Property Owner (Print Your Name) _____ Phone # _____
LLC/Incorporated/Company Name if applicable _____
Your Home Address _____ City _____ St _____ Zip _____
Email address: _____

Drivers License Number _____ Date of Birth _____ Signature of Applicant/Business Owner _____
Notary Information: I hereby certify that the information given herein is correct and true. Subscribed and sworn to before me this _____ day of _____ 201_ _____

Notary Signature _____ Notary Public Stamp Or Seal _____

CURRENT PROPERTY OWNER INFORMATION:

NOTE: A COPY OF YOUR DRIVERS LICENSE (PRIVATE OWNER) OR BUSINESS CARD WITH REPRESENTATIVES NAME(CORPORATIONS OR BANKS) MUST ACCOMPANY THIS APPLICATION

Current Property Owner (Print Your Name) _____ Phone # _____
LLC/Incorporated/Company Name if applicable _____
Your Home Address _____ City _____ St _____ Zip _____
Email address: _____

Drivers License Number _____ Date of Birth _____ Signature of Property Owner _____
Notary Information: I hereby certify that the information given herein is correct and true. Subscribed and sworn to before me this _____ day of _____ 201_ _____

Notary Signature _____ Notary Public Stamp or Seal _____

Dept Notes: _____

Zoning Notes: _____

Office Use Only: Accepted by: _____ Date received _____ Amount Received **\$ 40.00** CK Number _____ Receipt # Issued _____