

CITY OF WYANDOTTE
CERTIFICATE OF COMPLIANCE
APPLICATION FORM

Property Address: _____

Number of Units: _____

How unit are identified – e.g. separate address, apt no., etc....

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Owner:

Name: _____

Address: _____

Phone Number: _____

Email Address: _____



Office Use Only:

Verify with Master File: Single Two Multiple Other

Completed Certificate of Occupancy: Single Two Multiple Other

Case No.: _____

Date of Inspection: _____ Time: _____

PLEASE MAIL TO: Engineering and Building Department
3200 Biddle Avenue, Suite 200, Wyandotte, MI 48192

EMAIL TO: engineering1@wyandottemi.gov