

<b>CITY OF DETROIT</b>  <b>DEPARTMENT OF APPEALS &amp; HEARINGS</b>  <b>Administrative Appeals Bureau</b>	<b>CLAIM OF APPEAL</b>  <b>Marijuana Licensing</b>	<b>BSEED APPLICATION NO.:</b>  <b>Applicant/Claimant Name:</b>
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Address: 2 Woodward Avenue, 1004 CAYMC, Detroit, Michigan 48226

Telephone No. 313-224-0098

Claimant Name, address and telephone no.
Attorney, bar no., address, and telephone no.

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City of Detroit Department, address and telephone no. <b>Buildings, Safety Engineering, and Environmental Department (BSEED)</b> <b>Coleman A. Young Municipal Center</b> <b>2 Woodward Avenue– Suite 401</b> <b>Detroit, Michigan 48226</b> <b>313-224-3179</b>
Attorney, bar no., address, and telephone no. <b>City of Detroit Law Department</b> <b>Coleman A. Young Municipal Center</b> <b>2 Woodward Avenue – Suite 500</b> <b>Detroit, MI 48226</b> <b>313-224-4550</b>

1. Applicant/Claimant \_\_\_\_\_ claims an appeal from the administrative decision of the Department of Buildings, Safety Engineering, and Environmental Department (BSEED) regarding a/an:

A. **Type of License:**

B. **Type of Licensing Application:**

2. The date of BSEED’s administrative decision is: \_\_\_\_\_.
3. A copy of BSEED’s administrative decision is attached.
4. The **Right to Appeal Certificate** is attached.
5. Payment of the \$25 Administrative Appeal filing fee is required.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Claimant/Attorney Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State Zip & Telephone Number