

ZONING SOLUTIONS, LLC
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Permit #	
Fee	\$50.00
Method of Payment	
Date Received	
Date Deemed Complete	
Received By	

MAKE CHECK PAYABLE TO THE MUNICIPALITY IN WHICH YOUR PROJECT IS LOCATED

ZONING PERMIT APPLICATION

<p>A drawing (site plan shown from a "bird's eye" view) indicating property lines, location of all buildings presently on the property and the location of the proposed new structure(s), must be submitted with this application. The site plan should also include measurements from your new project to property lines and distances between all structures. An application will not be deemed complete or processed until the permit fee has been paid, a site plan submitted, proof of ownership provided, and this form completed. "Change of Use" applicants are exempt from providing a site plan as indicated and instead, will provide a statement of the proposed new use of the existing structure.</p>		
Project Location / Property Owner Information		
Street Address		
Parcel Number		
Municipality () City () Village () Township of:		
Name of Property Owner		
Address	City, State	Zip
Telephone	Email	
Applicant (Contractor / Property Owner Information)		
() Contractor () Property Owner		
Name		
Address	City, State	Zip
Telephone	Email	
Type of Project (Please mark as many as are applicable)		
() New Construction	() Single Family Home	
() Addition	() Multifamily Home	
() Alteration / Remodel	() Mobile Home or Prefabricated Home	
() Change of Use (Current Use _____)	() Attached Garage	
() Other _____	() Detached Garage	
	() Accessory Building (Other)	
	() Fence	
	() Deck / Porch	
	() Commercial Building	
	() Other _____	

Building Characteristics

The proposed building characteristics of this project are as follows:

Feet	Description	Detail
	From front lot line, measured from	<input type="checkbox"/> Center line of road <input type="checkbox"/> Right of way line
	From front lot line on a body of water	Measured from the high water mark
	From rear property line	Measured from the rear property line
	From right side lot line	Determined from the road looking at the lot
	From left side lot line	Determined from the road looking at the lot
	From any and all existing structures	Determined from closest point on each structure
	Wall height of proposed structure	Determined from average undisturbed grade
	Ground to peak height of proposed structure	Determined from average undisturbed grade
	Proposed structure length	From widest point of structure
	Proposed structure width	From widest point of structure
	Square feet of gross floor area	Total square footage of structure
	Square feet of living space	Finished space for living for habitation
	Total lot coverage	Total lot coverage of all structures
	Distance from lake, stream, shore, pond	To be measured from high water mark
	Agricultural Use (100%) <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Letter of Understanding required.

I, the undersigned, affirm that the foregoing answers, statements, and information and any attachments are in all respects true and correct to the best of my knowledge and belief. I understand that the Zoning Permit applied for, if granted, is issued on the representations made herein and that any Zoning Permit subsequently issued may be revoked because of any breach of representations or conditions, or because of the lack of continued conformance with zoning ordinance requirements. I understand that incomplete applications which also includes application fees will not be processed. Incomplete applications will be closed after 45 days, applicant will have to re-submit including all applicable fees. I, the undersigned, fully understand that acceptance and/or approval of this application for zoning permit does not confer approval by any other municipal entity. I, the undersigned, authorize the Zoning Administrator and any other person authorized by the Zoning Administrator, to enter onto the property subject to this permit hereon for the purpose of conducting inspections for compliance. Failure by the undersigned to permit such inspections shall result in the Zoning Permit Application being denied, or immediate termination of the Zoning Permit that has been issued. I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent, and agree to conform to all applicable laws of the State of Michigan. I understand that the Zoning Administrator may require that a survey be performed to verify information regarding the property and/or buildings and/or structures located on the parcel. I understand that incomplete applications, or applications that have been denied, will only be held open for 45 days. After 45 days, a new application will have to be submitted along with new application fees.

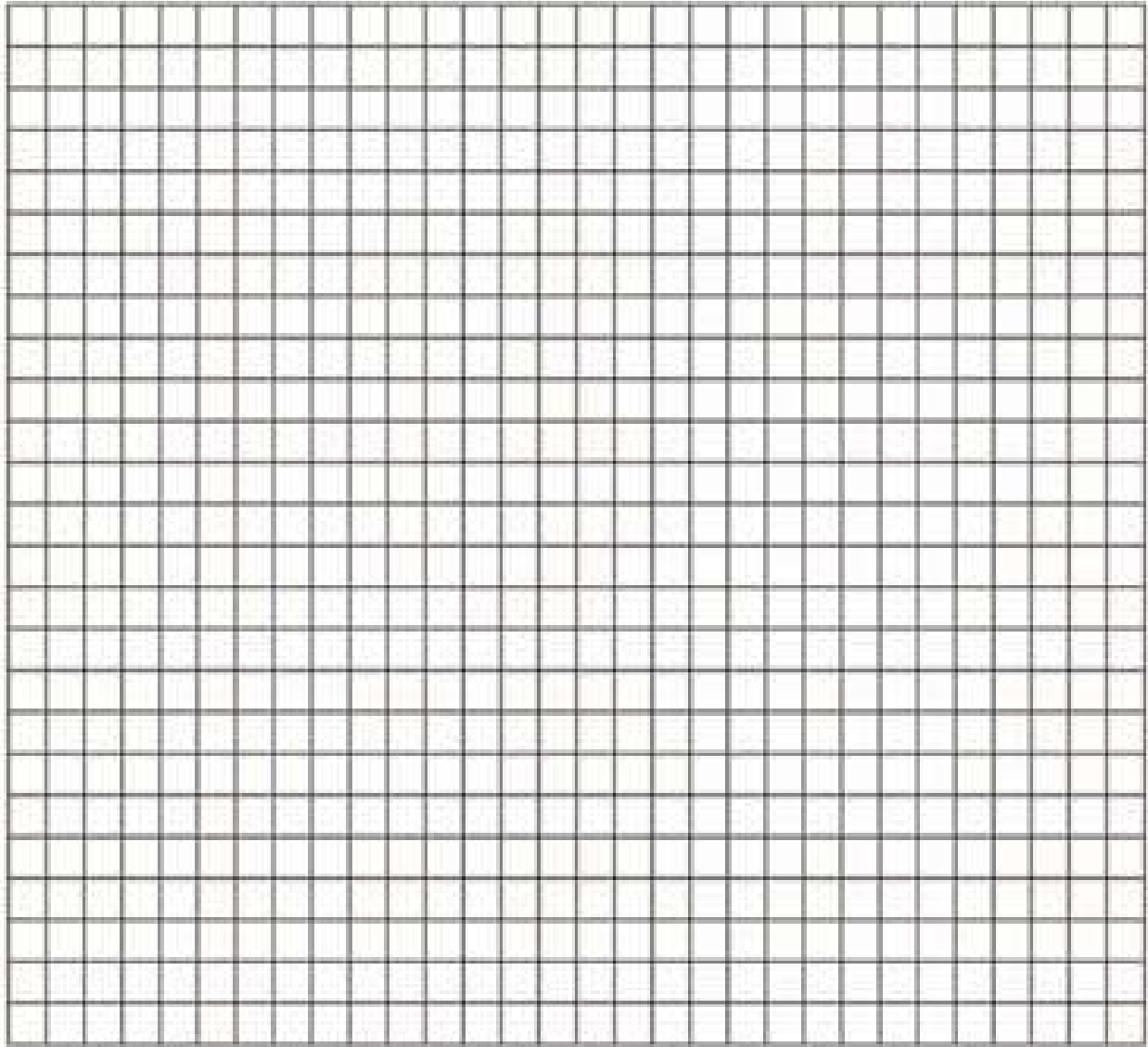
APPLICANT SIGNATURE	DATE
PROPERTY OWNER SIGNATURE	DATE

OFFICIAL USE ONLY

<input type="checkbox"/> Approved	<input type="checkbox"/> Approved with Conditions	<input type="checkbox"/> Denied
Zoning Administrator Signature		

Site Plan / Plot Plan

Place the NORTH ARROW in the CORRECT DIRECTION here: _____



The plot plan must be completed in its entirety prior to any review. This grid paper may be used or a separate plan attached. Required information includes, but is not limited to:

1. The location, shape, area and dimension of the lot.
2. The location, dimensions, and height of any and all existing and/or proposed structures to be erected, altered, or moved on the lot. Measurements from all property lines and other structures shall be included. Measurements shall be from widest point of structure to widest point of structure.
3. All streets that adjoin the property.
4. All front, side and rear yard setback dimensions, and where such dimensions are measured from.
5. Location of any lakes, streams, ponds or wetlands, on or adjoining the property.
6. Configuration of existing and/or proposed driveways.
7. Location of any existing and/or proposed septic system, drain field and well easements or right of ways.
8. Location of any existing and/or proposed legal easements.

