

# NORTH BRANCH BUILDING DEPT

6771 Elm St Box 186  
North Branch MI 48461

DATE \_\_\_\_\_

Telephone: 810.688.3031

## ZONING PERMIT APPLICATION

Applicant: \_\_\_\_\_ Telephone: \_\_\_\_\_

Owner \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ MI \_\_\_\_\_

JOB SITE LOCATION: \_\_\_\_\_

**PARCEL IDENTIFICATION NUMBER** \_\_\_\_\_

Permit To: Construct New [ ] Alter [ ] Remodel [ ] Raze [ ]

Specify Use:

[ ] Single Family Dwelling [ ] Single Family Dwelling w/ Att Garage [ ] Breezeway / Garage

[ ] Addition

[ ] Pool Above Ground - In Ground (circle one) Size \_\_\_\_\_ [ ] Pond

[ ] Other [ ] Accessory Building \_\_\_\_\_ Ft x \_\_\_\_\_ Ft

**TOTAL SQUARE FOOTAGE** \_\_\_\_\_ (MEASURED FROM INSIDE THE EXTERIOR WALLS)

Does this property have frontage on two roads? Yes [ ] No [ ]

Is there a dwelling on the property? Yes [ ] No [ ]

Are there any easements on the property? Yes [ ] No [ ]

Is there an accessory building on the property? Yes [ ] No [ ]

Is this property located within a flood plain? Yes [ ] No [ ]

Is the structure located within 500 ft of a river, stream or natural body of water? Yes [ ] No [ ]

Will the construction require the moving of one surface acre? Yes [ ] No [ ]

Will the construction require the removal of any soils off-site? Yes [ ] No [ ]

I certify the above answers are true. I also understand that it is my responsibility, as the permit holder, to be aware of and comply with all local, state or federal regulations impacted by the issuance of this permit.

Date \_\_\_\_\_ Applicants/Agents Signature \_\_\_\_\_

Birthdate \_\_\_\_\_ Drivers License Number \_\_\_\_\_

Address: (if different than Owner) \_\_\_\_\_

**APPLICATION FEE \$ 40.00 \*\***

**DO NOT WRITE BELOW THIS LINE ....**

**LAND USE RESTRICTIONS**

PROPERTY IDENTIFICATION NUMBER \_\_\_\_\_

ZONING DISTRICT \_\_\_\_\_

SETBACKS - FRONT \_\_\_\_\_ (Measured from Center of Road) SIDE \_\_\_\_\_ REAR \_\_\_\_\_

Note: if frontage is on corner lot or two roads a front yard setback is from each road.

ROOF PITCH VERIFIED (TRUE 4/12) YES [ ] NO [ ]

STAKE OUT INSPECTION REQUIRED YES [ ] NO [ ]

Stipulations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PERMIT APPROVED [ ] DENIED [ ] **PERMIT NUMBER** \_\_\_\_\_

\_\_\_\_\_  
ZONING ADMINISTRATOR

\_\_\_\_\_  
DATE

## SITE PLAN REQUIREMENTS

Indicate all property lines.

Location of all existing and exposed structures.

Location of all natural features, including ponds, streams, wetlands or flood plain area.

Location of any easements or underground utility, overhead lines or access.

Dimensions of the proposed structure.

Dimension from road right of way and property lines to proposed structure.

Location of well and septic areas.

North