

APPLICATION FOR ZONING PERMIT

BENZIE COUNTY ZONING DEPARTMENT

448 COURT PLACE
 BEULAH, MI 49617
 Ph: 231-882-9674
 Fax: 231-882-0164

PERMIT # _____
 Date Received: _____
 Date Issued: _____
 Date Expired: _____
 Zoning District: _____ Fee: \$ _____
 Paid By: _____

An accurate site plan and floor plan , including dimensions are required to be submitted with this application. Site/Floor Plan attached: Yes ___ No ___	2 copies of the site plan <u>must</u> be submitted if the site plan is larger than 11" x 17"	Property Lines and actual Building Site must be staked prior to inspection. DATE STAKED: _____
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Location: _____
 (Street Address or accurate directions to the site)

Township: _____ Tax Number 10- _____

Owner(s)

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Cell Phone: _____

Applicant:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ Cell Phone: _____

General Contractor: _____ Address _____ Phone: _____

Description of Project: _____ Category of Use: Residential Commercial Industrial
 (Circle One)

List Each Structure or Use **Separately (attached garages, decks are separate structures)**

	Width	Length	Height	Total Sq. Ft.	Fee
1					
2					
3					
4					

Set Backs: Front: _____ Rear: _____ Side: _____ Side: _____

Lot Size: _____

I hereby certify that all the statements and/or information contained herein or submitted with this application are true and that I will comply with all applicable Federal, State, and local laws concerning this project. Any noncompliance with the provision of this permit or said laws will render this permit null and void.

REMARKS:	<div style="text-align: center; border-top: 1px solid black; margin-top: 20px;"> (Signature Owner or Agent) </div> Application: <input type="checkbox"/> Approved <input type="checkbox"/> Denied By: _____ <div style="text-align: center;">Craig Seger, Zoning Administrator</div> Date: _____
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