

Zoning Permit Application – Fee \$100

1. Project Information

Owner Name \_\_\_\_\_

Project Address \_\_\_\_\_

Parcel # \_\_\_\_\_ Zoning District \_\_\_\_\_

2. Applicant/Contractor Information

Name \_\_\_\_\_

Phone \_\_\_\_\_ Email (required!) \_\_\_\_\_

3. Project Type

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> New Residential Dwelling | <input type="checkbox"/> Accessory Building    | <input type="checkbox"/> Pool- Over 24” deep, 250sq.ft |
| <input type="checkbox"/> Residential Addition     | <input type="checkbox"/> Agricultural Building | <input type="checkbox"/> Signage - Business            |
| <input type="checkbox"/> Deck                     | <input type="checkbox"/> Home Occupation       | <input type="checkbox"/> Other                         |

**Please attach:**

- A detailed site plan showing exact location and distance of proposed construction to existing structures and lot lines. The Zoning Administrator may require a survey in some instances.
- \*\*\*Construction plan showing **height to the peak \_\_\_\_\_ and square footage \_\_\_\_\_** (Note: This may be a sketch, but dimensions must be the same as shown on detailed construction drawing submitted to Building Official).\*\*\*
- New Residential Dwelling- a floorplan must be included.
- New Residential Dwelling- Muskegon County Road Commission Driveway Permit.
- New Residential Dwelling- Sketch of driveway meeting Zoning Ordinance Section 3.27D or E.
- New Residential Dwelling – Well and Septic Permit from Muskegon County Health Department.
- If this project is within 500 feet of a regulated wetlands a SESC and/or EGLE permit are required. Must include a copy.
- You must contact the Water Resources Commissioner if project is within 500 feet of a drain. Include a copy of the email showing response from the Water Resources Commissioner.
- Pole Barn/Accessory building will NOT be used for living quarters.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

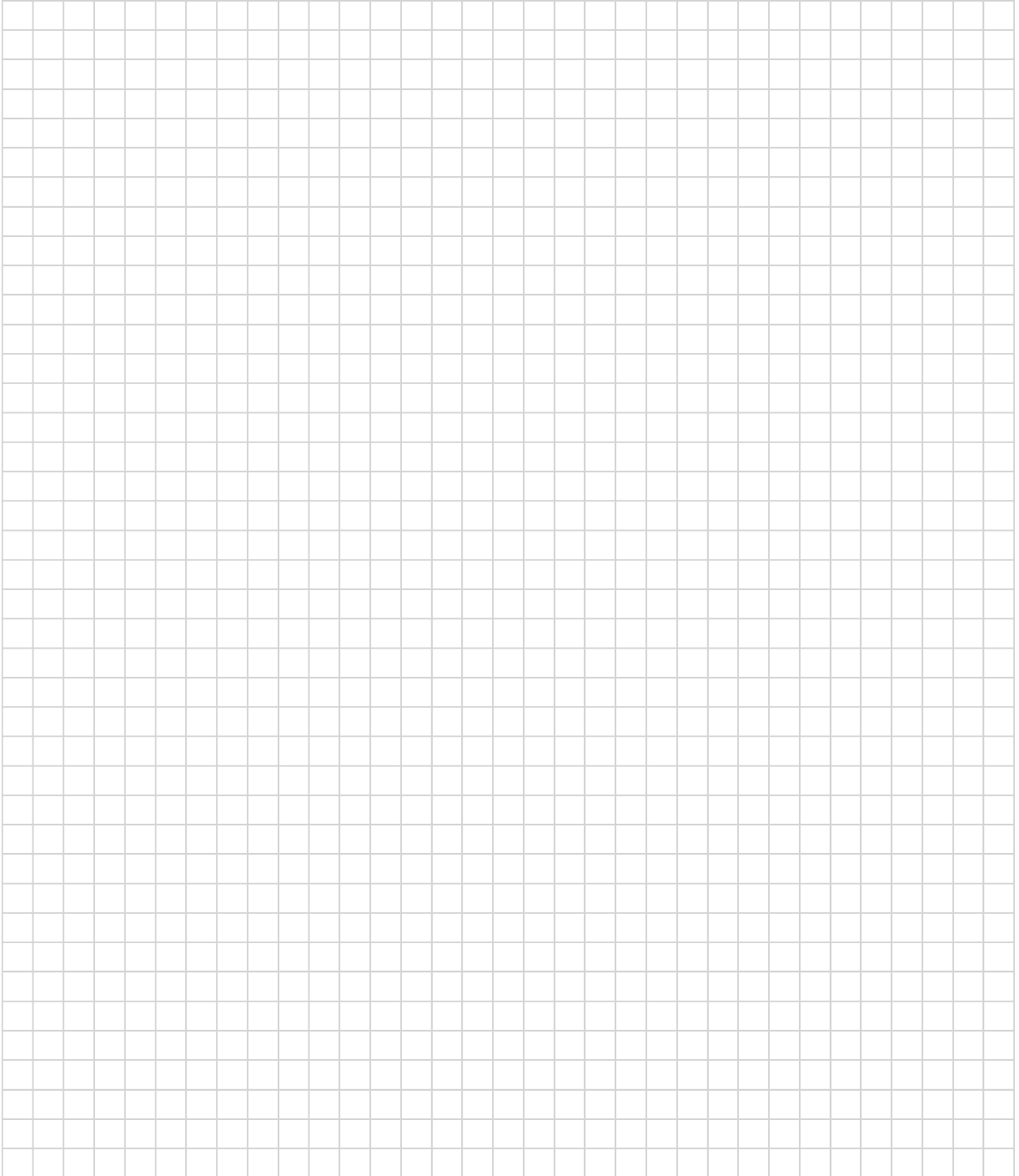
\*\*\*\*\* for office use only – do not write below line \*\*\*\*\*

Zoning:  Approved  Denied

Conditions \_\_\_\_\_

Zoning Official Signature \_\_\_\_\_ Date \_\_\_\_\_

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