

Belvidere Township

Montcalm County, Michigan

P.O. Box 144, Six Lakes, MI 48886 Phone (989) 365-3783 Fax (989) 365-3783

ZONING PERMIT APPLICATION – DWELLING

(Single Family and Two-Family Dwellings and Related Accessory Uses/Structures)

References to "Section" and "Article" refer to the Belvidere Township Zoning Ordinance They are provided to assist the applicant. The references highlight parts of the Ordinance that may apply but do not necessarily identify all parts that apply.

Important Notice to Applicants: This application must be completed in full and 3 copies submitted to the Zoning Administrator (see #15). All questions must be answered completely. If additional space is needed, number and attach additional sheets. Approval of this application is required before a Zoning Permit can be issued. The erection of a building or structure, or excavation for any building or structure, prior to the issuance of a Zoning Permit and Building Permit, is a violation of the Zoning Ordinance.

- 1) **Applicant:** _____
Name Street Address City/State/Zip Telephone
- 2) **Landowner:** _____
(if different than applicant) Name Street Address City/State/Zip Telephone
- 3) **Applicant's Interest in Property:** Owner Lessee Buy Option Other/Specify: _____
- 4) **Property Address:** _____ and **Parcel Acreage:** _____
- 5) **Tax Parcel #:** _____
- 6) **Zoning District:** _____
- 7) **Deed restrictions on parcel:** Yes No
- 8) **Is parcel in a** platted subd. or condo. subd. If "yes", Subdivision Name: _____
- 9) **Existing Use of Property:** _____
- 10) **Legal Description** (attach sheet if necessary) _____

11) **Names, addresses, phone #s** of all other persons or entities having legal or equitable interest in the land not otherwise listed in (1) or (2):

12) **This application is made for which of the following:** (Check all that apply)

- Single family dwelling, Sec. 20.9 Detached Garage, Sec. 20.10 Temporary Dwelling, Sec. 20.11
- Pole Barn or other accessory building (excluding garage), Sec. 20.10
- Outdoor swimming pool, Sec. 20.15 Other/Specify: _____

13) **Which of the following best describes the nature of the proposed activity?**

- New dwelling, and/or accessory residential use/building, on vacant parcel
- Expansion, renovation and/or repair of existing dwelling and/or existing accessory residential use/building
- Other/Specify: _____

14) **If the parcel or any existing structure(s) are nonconforming, describe each nonconformity** (see Article 11). These nonconformities may apply to, for example only, setbacks, lot area, lot width and building height.

FOR TOWNSHIP USE ONLY			
Application Number:		Tax Parcel Number:	
Date Received:		Zoning Administrator Action Taken (circle as appropriate)	
Fee Paid	Date	<input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied	
1)		on the following date: _____	
2)			
Notes:			

15) SUPPORTING DOCUMENTS: 3 copies of the following materials shall be submitted along with 3 copies of this completed application.

- A. Plot Plan:** Prepared according to Sec. 2.4(B).
- B. Proof of Property Ownership:** Attach proof of ownership of the property such as a warranty deed, land contract or other evidence of interest in the property
- C. Deed Restrictions:** Attach a copy of all deed restrictions applicable to the subject property.
- D. Detailed Description:** A detailed description of the proposed actions being applied for. The narrative description must be dated along with the signature of the applicant, and the preparer's signature.
- E. Copies of Permits:** Attach copies of all permits received such as, by example, septic permit, well permit, driveway permit, wetland permit, and soil erosion/grading permit.
- F. List of Attachments:** Check attachments as applicable and note the number of pages of each:

- Legal Description; pages _____
- Deed Restrictions; pages _____
- Detailed Description; pages _____
- Permits _____; pages _____
- Other _____; pages _____
- Other _____; pages _____
- Proof of Property Ownership; pages _____
- Plot Plan; pages _____

16) AFFIDAVIT: I (we) agree the statements made above are true, and if found not to be true, any zoning permit that may be issued may be void. I (we) agree to comply with the conditions and regulations provided with any permit that may be issued, and that any permit that may be issued is with the understanding all applicable provisions of the Belvidere Township Zoning Ordinance will be complied with. I agree to notify the Belvidere Township Zoning Administrator for inspection before the start of construction when locations of proposed uses and structures are marked on the ground. I agree to permit officials of Belvidere Township, the County and the State of Michigan to enter the property subject to this permit application for purposes of inspection. Finally, I understand this is a zoning permit application and not a permit and that a zoning permit, if issued, conveys only land use rights, and does not include any representation or conveyance of rights in any other statute, building code, deed restriction or other property rights.

Applicant Signature(s)	Date	Property Owner's(s) Signature(s) <small>(if different than applicant)</small>	Date	Date