

FRUITLAND TOWNSHIP ZONING COMPLIANCE APPLICATION

FEE: \$75.00 Date Paid: _____ Check/Cash: _____ Accepted By: _____ Other: _____

SUBMITTED MATERIALS: Site Plan _____ Driveway Permit _____ (Parcel on Public Street)
EGLE Permit _____ (Any Lake Michigan Parcel) Soil & Erosion Permit _____ (If building a structure
within 500' of a lake or stream; or 1 acre or more of land is being disturbed)

OWNER INFORMATION

NAME: _____

PHONE: _____

STREET: _____

CITY, STATE, ZIP _____

EMAIL: _____

APPLICANT INFORMATION

ASSOCIATION: _____ (IF DIFFERENT THAN OWNER):

PHONE: _____

STREET: _____

CITY, STATE, ZIP: _____

EMAIL: _____

Be sure all requested information is inserted, or an explanation as to why the information is not included, or your application will be returned.

PARCEL IDENTIFICATION NUMBER: _____

ADDRESS OR LOCATION OF REQUEST: _____

CROSS STREETS: _____

This application must be accompanied by a

- site plan that shows North, exhibits the parcel dimensions, dimensions of existing improvements, dimensions of proposed improvements and their setbacks;*
- explanation of access;*

DESCRIPTION OF PROPOSED USE / REQUEST: _____

NEW CONSTRUCTION: _____

ACCESSORY BUILDING: _____

BUILDING DIMENSIONS: _____

BUILDING DIMENSIONS: _____

BUILDING SQUARE FOOTAGE: 1st FLOOR: _____

Section 3.08 F. Setbacks for detached accessory structures shall be measured to the eaves of the building.

(Minimum 1,120 square feet GFA 2nd FLOOR: _____

HEIGHT: _____

960 square feet on ground TOTAL: _____

floor) HEIGHT: _____

ATTACHED GARAGE 1ST FLOOR: _____

ATTACHED GARAGE 2ND FLOOR: _____

I, hereby attest, that the information on this application is, to the best of my knowledge, true and accurate. I hereby certify that the purpose for which this permit is granted will conform to zoning ordinances.

Signature of Applicant

Date

NOTE TO APPLICANT: *This is optional and will not affect any decision on your application.*

hereby grant permission for the Fruitland Township Zoning Administrator to enter the above described property (or as described in the attached), and as associated within this Zoning Application for the purpose of gathering information related to this application/request/proposal.

Signature of Applicant

Date

PARCEL NUMBER: 61-06 _____ PARCEL DIMENSIONS: _____ X _____

*****IMPORTANT*** Site Plan of Property and Location of ALL Structures.**

Show ALL existing and Proposed Structures and their Dimensions, Show Front, Rear and Side Yard Setbacks; Provide North Arrow; Show Dimensions of Existing and/or Proposed Structures, Include Size and Distance from Lot Lines.

*** I hereby attest that all buildings on the site are shown, that the dimensions submitted on the site plan are true and correct and all construction will be completed in accordance with the stated dimensions.

*** Applicant Signature: _____ Date: _____

*Section 3.08 F. Setbacks for detached accessory structures shall be measured to the eaves of the building.
Rear Lot Line or Water Front Boundary*

Side
Lot
Line
Or
Side
Street

Side
Lot
Line
Or
Side
Street

Road Right of Way (Starts 33' from center of road)

Site Address: _____ Date: _____