

South Arm Township ZONING - LAND USE PERMIT APPLICATION

Parcel Number _____
Date: _____
Name: _____

Applicants Name _____
Applicants Address _____
city, state, zip code _____
(telephone, home and business) _____

FOR OFFICE USE ONLY
Case Number _____
Date Received _____
Fee Received _____
Receipt Number _____
(attach inspection report sheets if applicable)

PROPERTY OWNER'S NAME AND ADDRESS (if not the applicant)

Phone (____) _____

If you are not the property owner what is your relationship to him/her? (circle one):

Builder Option to purchase Agent/other _____

PROPOSED CONSTRUCTION SITE ADDRESS _____
(If new construction, an address will not be known. An address is obtained after a zoning permit is issued.)

PARCEL SIZE _____
PROPERTY DESCRIPTION _____

PARCEL DATA PROCESS (tax) NUMBER _____
SIZE OF BUILDING, STRUCTURE, ADDITION _____

ATTACH REQUIRED PLANS, DRAWINGS, AND SPECIFICATIONS FOR THE PROPOSED LAND USE AND BUILDINGS ACCORDING TO ARTICLE X OF THE SOUTH ARM TOWNSHIP ZONING ORDINANCE. (If this permit is for anything more than a new or repair to single or two-family dwellings, attach a site plan pursuant to Section Article VI for Planning Commission review.)

AFFIDAVIT: I agree the statements made above are true, and if found not to be true, any zoning permit that may be issued may be void. Further, I agree to comply with the conditions and regulations provided with any permit that may be issued. Further, I agree the permit that may be issued is with the understanding all applicable sections of the South Arm Township Zoning Ordinance will be complied with. Further, I agree to notify the zoning administrator of South Arm Township for inspection before the start of construction and when locations of proposed uses are marked on the ground. Further, I agree to give permission for officials of South Arm 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 (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.

Signed: _____
Date: _____

When completed send to:
South Arm Twp. Zoning Admin.
P.O. Box 304
East Jordan, MI 49727

OFFICE USE ONLY:

Requirements for Social Use Permits, PUD's and Site Plans:

	Date submitted		Date submitted
Required Map	_____	Site inventory	_____
Engineered Drainage Plan	_____	Fire Dept. Approval	_____
Soil Erosion permit	_____	Wetlands permit	_____
Topographic Maps	_____	Soil Borings	_____
Impact Statement	_____	Site Grading Plans	_____
Fence or Screening Plan	_____	Landscape Plan	_____
Improvement Guarantees	_____	Parking Plan	_____
Health Dept. approval	_____	Road Commission	_____
Other licenses or permits	_____	MDOT approval	_____

RECORD OF TOWNSHIP ACTION:

APPROVED: _____

DENIED: _____

CONDITIONALLY APPROVED, with following conditions:

COMMENTS:

APPROVED BY: _____ DATE: _____

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