

Permit No. _____

Application for Building Permit
ZEELAND CHARTER TOWNSHIP
OTTAWA COUNTY, MICHIGAN

Application is hereby made under the terms and conditions of the Zeeland Charter Township Zoning Ordinance for:

| | | | | | |
|------------|--------------------------|---|--------------------------|--------------|--------------------------|
| Erection | <input type="checkbox"/> | One family residence | <input type="checkbox"/> | Agricultural | <input type="checkbox"/> |
| Addition | <input type="checkbox"/> | Two family residence | <input type="checkbox"/> | Commercial | <input type="checkbox"/> |
| Alteration | <input type="checkbox"/> | Barn <input type="checkbox"/> Acc. Bld. | <input type="checkbox"/> | Industrial | <input type="checkbox"/> |
| _____ | <input type="checkbox"/> | _____ | <input type="checkbox"/> | Residential | <input type="checkbox"/> |

Owner _____

Location of property _____

Lot area _____ Zone _____ Sec. _____

Permit for _____

Value of construction _____ (Note: true value or cost, whichever is larger)

Distances from building or projections thereof to property lines:

Front _____ R.O.W. Rear _____ Left side _____ Right side _____

Overall length of building _____ Overall width of building _____

Number of stories _____ Height _____ Depth of basement _____

Describe type of building, material, construction, etc. _____

Fireplace _____ Extra chimney _____ Walkout basement _____

To be wired for electricity _____ Plumbing installed for _____

Intended use of building _____

Name of contractor _____ License No. _____

Contractor phone number _____ Plans & spec. submitted _____

Date of application _____ Date work will begin _____

The undersigned makes this application, stating the above to be true; understanding this is an application; and that work is not to commence until this application is approved; knowing that the burden is on the applicant to notify the Zoning Administrator at three stages:

1. After footing and walls are damp proofed and tiled prior to backfill
2. Upon completion of frame, roof shingles, side wall sheathing, rough electrical, mechanical & plumbing, and before insulating & lathing.
3. Upon total completion.

_____ NAME OF APPLICANT

Fee of \$ _____ received _____ ADDRESS

_____ TOWNSHIP ZONING ADMINISTRATOR _____ PHONE NUMBER

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