Application Date:	
Permit No.	

APPLICATION FOR ZONING COMPLIANCE PERMIT

PLEASE PRINT OR TYPE (if additional space is needed, use back side of application.)

The application must be accompanied by one (1) copy of scale plot plans meeting the information requirements of the Zoning Administrator. This application **MUST** be signed and approved by the Zoning Administrator <u>before</u> the applicant may apply for construction permits with the County.

Applicant Information	on									
Name:										
Address:				City:				Zip C	ode:	
Telephone:	e: Email:									
Interest in Subject Pro	operty:									
Owner(s) Information	on: (if different fro	om applic	ant, includ	de owner-	signed cor	sen	t to, and certi	fication	of, applica	tion)
Name:										
Address:	ress: City			City:	xy:			Zip Code:		
Telephone:			Email:							
Interest in Subject Pro	operty:									
Project and Property Information:										
Project Description:	i i					☐ construct new building(s)				
	☐ add to existing building(s)				☐ alter existing building(s)					
For the following use((s):									
Zoning Classification: ☐ R-1 Residential ☐ AG Agricultural										
Please indicate if this is a building for agricultural purposes only. If so, then also complete the Agricultural Accessory Building Form and submit with this Yes No application. To qualify, current zoning of the property must be Agriculture (AG).										
Property Identification Number:										
Subject Property Address:				City:			Z	ip Code:		
Legal Description:						<u> </u>				<u>.L</u>
Average Lot Width (ft):				Average Lot Depth (ft):						
Building Length (ft):				Building Width (ft):						
Lot Area: (AC or SF):				Building Height (ft):						
Total Floor Area (sf):			Front Yard Setback (ft):							
Side Yard Setback 1		Side Yard Setback 2 (ft):			:		Rear Yard Setback (ft):			
		l								
Applicant(s) Certific	ation:									
Applicant(s) acknowledges that the information submitted in and with this application is true and correct to the best of his/her knowledge.										
Applicant Signature(s):						Date:				
								Date:		

Dallas Township Clinton County, Michigan		А	pplication Date: Permit No				
Applicant(s) Acknowledgen Applicant(s) acknowledges th applicable Dallas Township O official(s) and that Dallas Tow official(s) that is not in complia	at he or she has the sole rdinance notwithstanding the nship is not bound to recog	ne signature Inize the ap	e or approval of any oproval or other action	Township employee(s) or			
Applicant Signature(s):		Date:					
				Date:			
Submission Requirement Checklist: Proposed location(s) of buildings, additions, and accessory structures Application Fee, made payable to Dallas Township Legal Description (attached separately if needed)							
	FOR TOWNSH	IIP USE C	NLY				
Fee Received: \$	Date:	By:					
Zoning Compliance Certific	ate:						
□ Granted		☐ Approved as Noted:					
☐ Denied (reasons noted below)			☐ Special Land	Use Permit Required			
			☐ Site Plan App	oroval Required			
Comments:							

☐ Zoning Enforcement Officer

Signature

Copy of Completed Application and, if granted, Permit to:

☐ Property Owner

Zoning Administrator:

☐ Applicant

☐ Township Clerk

Date: