

TOWNSHIP OF LILLEY COUNTY OF NEWAYGO STATE OF MICHIGAN
APPLICATION FOR ZONING COMPLIANCE PERMIT

ZONING ENFORCEMENT OFFICER
JEFFREY WROBLEWSKI or (Madalyn) Assistant
2433 W 13 MILE RD
(231) 250-9750

BUILDING INSPECTOR
Duane Cruzan
P.O. Box 333
White Cloud, MI 49349 (231) 224-3960

Application # _____
Date _____

1. Application is hereby made by the undersigned to:
 - Land Use Construct new building(s)
 - Add to existing buildings (s) Alter existing building(s)
 - Construct sign or billboard for the following use: _____
 2. The applicant (s) is/are the owner(s) of the property involved.
Are not the owner(s)
 3. Address of property _____
 4. Legal description or tax number _____
 - A. Estimated cost of construction \$ _____
 - B. Septic permit number _____
 5. Present Zoning _____
 6. Lot area _____ A/sq. ft.
 7. Average of lot width _____ ft.
 8. Front yard setback _____ ft.
 9. Side yard setback _____ ft.
 10. Total both side yards _____ ft.
 11. Percent of lot covered _____ %
 12. Building height _____ ft.
 13. Total floor area _____ sq. ft.
 14. Number of bedrooms _____
 15. Off street parking _____ cars _____
 16. Cent. Sewer Y/N _____
 17. No. Of new buildings _____
 18. Distance between buildings _____ ft.
 19. If Mobile Home...Make _____
Ser. No. _____
Model _____ Year _____
Outside dimensions _____
- Mobile homes must be skirted within 30 days of setup.

The undersigned hereby agrees to comply with all ordinances of Lilley Township, Newaygo County, Michigan and of any other agencies of governmental units, which may be involved. Applicant signature hereon grants permission for Township zoning official inspections as required to assure compliances with permit granted.

I/We _____ do hereby swear that the above information is true and correct to the best of my/our knowledge.

Date _____ Applicant(s) _____
Signature

Phone _____
Signature

Address _____

License# _____

Fee received \$15.00 Exp. Date _____ DOB _____

Make checks Payable to "Lilley Township"

A ZONING COMPLIANCE PERMIT for the proposed use of said property is hereby:

GRANTED **REFUSED** for a term of 12 months from this date, for the following reasons:

Date _____ Zoning Officer _____

This approval is contingent upon receipt of the following permits or approval of the following permits...

Building Permit Soil-Erosion Permit Health Dep. DNR

One copy to Applicant One Copy to Zoning Officer One Copy to Building Inspector