# APPLICATION FOR ZONING PERMIT OGEMAW COUNTY, MICHIGAN

Pursuant to Chapter 21, Section 21.9 of the Ogemaw County Zoning Ordinance-

"Except as otherwise provided, no building or structure of any kind, including signs, shall be erected or demolished or any restricted use undertaken until a permit has been issued by the Zoning Administrator. Once it has been determined by the Zoning Administrator that the proposed building, structure, or use is in conformance with all the provisions of the township ordinance and appropriate fees are paid, a Zoning Permit may be issued. The Zoning Permit shall be non-transferable and shall remain valid for one (1) year from the date of issuance. A Zoning Permit must be obtained prior to the approval of a building permit."

Date	Zoning Permit #	
Applicant's Name_		
Mailing Address_		
City		
Home Phone Number	Fax	Cell
ZON	ING APPLICATION	FOR
Construction/Demolition		Land Use
Type of Construction		
Intended use and purpose for the proposed		
PROPERTY	/ IDENTIFICATION AND I	LOCATION
Tax ID#: 65	Section#	
Property Owner's Name		
Property Owner's Phone Number		
Address of Property		
Nearest Main Road		

#### SITE PLAN INFORMATION

### Site or Plot Plan – Applicant please see instruction attached.

Name	Property ID
	North
	South
property lines, setbacks, building sets responsible for the legal ramification hold harmless the County of Ogen	ne event I provide inaccurate or false information in my site plan as to the sizes, locations of structures or any other pertinent facts, I am liable and ons of said false or inaccurate information and herby expressly agree to naw for any damages subsequently awarded by any Court for any action
based upon the granting of the per Applicant's SIGNATURE	•
	FOR DEPARTMENT USE ONLY
	Application Approval
Date	
	C4
Zoning Permit #	Stamp

#### **SITE PLAN DRAWING REQUIREMENTS**

Ogemaw County Planning and Zoning

806 W. HOUGHTON AVE, ROOM 107, WEST BRANCH, MI 48661

OFFICE HOURS: MONDAY –FRIDAY, 4:30-5:30 PM

PHONE: 989 345-3375

## FOLLOW THESE INSTRUCTIONS CLOSELY!! INCORRECT OR INCOMPLETE DRAWINGS WILL BE REFUSED!!!

- 1. ORIENT DRAWING BY DIRECTION—NORTH, SOUTH, ECT.
- 2. USE THE ENTIRE SQUARE TO REPRESENT YOUR LAND.
- DRAW AND LABEL WITH DIMENTIONS ALL EXISTING BUILDINGS ON YOUR PROPERTY.
- 4. DRAW AND LABEL WITH DIMENTIONS THE PROPOSED NEW CONSTRUCTION.
- 5. PROVIDE MEASUREMENTS FROM ALL EXISTING AND PROPSED BUILDINGS TO ALL 4 LOT LINES AND THE DISTANCE BETWEEN ALL BUILDINGS.
- 6. IF YOU ARE ADDING TO THE NUMBER OF BEDROOMS, YOU MUST PROVIDE APPROVAL FROM THE DISTRICT HEALTH DEPARTMENT#2 APPROVING THE ADDITION. THEIR # 989 345-5020.
- 7. SHOW ALL LAKES OR STREAMS ON THE PROPERTY.
- 8. PROVIDE THE NAME OF ANY PUBIC OR PRIVATE ROAD ALONG THE SIDE WHERE IT BORDERS YOUR PROPERTY.
  - NOTE: IF THE PROPERTY IS ACCESSED BY AN EASEMENT THAT ENDS ON YOUR PROPERTY, SHOW WHERE IT ENDS AT YOUR PROPERTY LINE.
- 9. PUT NAME, ADDRESS AND PHONE NUMBER OF THE PERSON WHO PREPARED THIS SITE PLAN.
- 10. YOU MAY BE REQUIRED TO PROVIDE ADDITIONAL INFORMATION, AND/OR A SURVEYED SITE PLAN.

#### <u>IMPORTANT</u>

SECTION 2.12 SUB-SECTION A PARAGRAPH 5 OF THE COUNTY ZONING ORDINANCE STATES:

A STORAGE BUILDING OR GARAGE MAY BE PERMITTED ON A LOT OR PARCEL THAT IS LESS THAN TWO ACRES, AND DOES NOT CONTAIN A DWELLING UNIT, PROVIDED THE LOCATION OF SUCH BUILDING IS APPROVED BY THE ZONING ADMINISTRATOR, BASED ON A SCALED SITE PLAN THAT SHOWS THE PROPOSED BUILDING LOCATION, SETBACKS FROM ALL PROPERTY LINES, A SEPTIC SYSTEM APPROVED BY THE HEALTH DEPARTMENT, AND AVAILABLE AREA FOR A FUTURE DWELLING UNIT (MINIMUM 720 SQ .FT.). ON PARCELS OF LAND TWO (2) ACRES OR LARGER, NO SEPTIC PERMIT IS REQUIRED IF THE PROPOSED BUILDING DOES NOT INCLUDE PLUMBING, AND NO SPACE MUST BE DESIGNATED FOR A FUTURE DWELLING. SHOULD THE PROPOSED BUILDING SITE BE ON A SUBSTANDARD PARCEL, A PERMIT MAY BE ISSUED, IF THE ABOVE RESTRICTIONS ARE MET.

THANK YOU FOR YOUR ASSISTANCE.

OGEMAW COUNTY PLANNING AND ZONING DEPARTMENT