

Date: _____

Application Number: _____

Review Fee: \$ 75.00

ZONING PERMIT

TAYMOUTH TOWNSHIP

4343 E. Birch Run Road

Birch Run, MI 48415

Phone: 989-624-4159 Fax: 989-624-5466

Applicant Information

Name: _____

Address: _____

Phone Number: _____ Email Address: _____

Property Owner (if different from applicant)

Name: _____

Street Address: _____

Phone Number: _____ Email Address: _____

Property for which permit is requested

Property Address: _____

Parcel Number (Tax ID Number): _____ Nearest Crossroads: _____

Current Zoning: _____ Current Use: _____

Proposed use of parcel

Additional Required Documents

- Provide a plot plan or site plan which shows dimensional relationships of all elements (lot shape and dimensions) on the parcel and adjacent parcels, including boundaries, proposed or existing buildings, and structures' locations and dimensions. Please include the location of any wells, septic systems, driveways (and any easements), lakes, rivers, streams, ponds, county drains, or water impoundments, indicate north and other additional information as requested by the Zoning Administrator.

Authorization to Access Property

I (we), the legal owners of the property described above, do hereby grant the Zoning Administrator, Township employees, their agents or representative permission to access and review the site for the purpose of this permit application.

Signature of Property Owner/Applicant

Date

Signature of Property Owner/Applicant

Date

FOR OFFICE USE ONLY

THE FOLLOWING MUST BE SUBMITTED BY THE APPLICANT:

- Completed Zoning Permit Application
- Application Fee
- Additional Required Documents

Date: _____

Amount: _____

Check#: _____

Cash: _____

CC/Debit: _____

Decision

- Application Approved
- Application Denied

Remarks
