

ZONING PERMIT# _____

Plainfield Township Building Department
Application for Residential Zoning Permit
P.O. Box 247 Hale, MI 48739
PH (989) 728-2811 FX (989) 728-6491
Authority: P.A. 230 of 1972 As Amended

Construction work shall not be started until the application for permit has been reviewed and the permit has been issued. All work shall be in conformance with the Residential Building Code. Provide all applicable information.

JOB LOCATION _____ TOWNSHIP/RANGE/SECTION _____

DIRECTION TO JOB _____

Type of Job: () New Single Family () Remodel Single Family () Addition () Accessory Bldg. () Foundation Only
() Platform () Premanufactured () Fence () Other _____

OWNER

CONTRACTOR

First Name _____

Business Name _____

Last Name _____

Licensee _____

Address _____

Address _____

City _____

City _____

State, Zip _____

State, Zip _____

Phone # / E MAIL _____

Phone # / E MAIL _____

Estimated Project Cost _____

State License # _____ Expires _____

ZONING DISTRICT _____

DATE _____

LOT/PARCEL SIZE _____ PROPERTY CODE _____

PROPOSED BUILDING SIZE _____ X _____

SEPTIC PERMIT NUMBER _____ ISSUE DATE _____

ESTIMATED COST OF PROJECT \$ _____

APPLICANTS SIGNATURE _____ ZONING ADMISTRATOR _____.

SITE PLAN/PLOT PLAN

FOR APPLICANT USE. SKETCH IN LAYOUT USING DIMENSIONS. SITE PLAN MUST HAVE: PROPOSED NEW BUILDING AND ALL EXISTING BUILDING WITH THEIR DISTANCES FROM THE PROPERTY LINES, STREETS AND WATERWAYS. INCLUDE SEPTIC AND WELL LOCATIONS AND LOT DIMENSIONS. ALSO HAVE PROPOSED NEW BUILDING AND PROPERTY CORNERS STAKED. PLEASE USE BACK OF THIS PERMIT TO SKETCH YOUR SITEPLAN/PLOT PLAN

FEE \$20.00 MAKE ALL CHECKS PAYABLE TO PLAIFIELD TOWNSHIP. FOR OFFICE USE ONLY.

REICEPT# _____ DATE _____ / _____ / _____