

ZONING PERMIT APPLICATION

Charter Township of Fenton
12060 Mantawauka Drive Fenton, MI 48430-8808
Inspection Division (810) 629-6711 General Offices (810) 629-1537

Estimated Value of Structure \$		Parcel ID: 06-	
PROJECT LOCATION			
Address:			
City:	State:	ZIP:	
OWNER INFORMATION			
Name:			
Address:		Phone: ()	
City:	State:	ZIP:	
CONTRACTOR INFORMATION			
Name:			
Address:		Phone: ()	
City:	State:	ZIP:	
License No.:		Expiration Date:	
Federal Employer ID Number or Reason for Exemption:			
Workers Comp. Insurance Carrier or Reason for Exemption:			
MESOC Employer Number or Reason for Exemption:			
TYPE OF PROJECT			
<input type="checkbox"/>	Accessory Building (200 Sq. Ft. or less) or other permanent structure		
<input type="checkbox"/>	Fence		
<input type="checkbox"/>	Pond		
<input type="checkbox"/>	Soil Fill/Removal		
PRINCIPAL TYPE OF FRAME (If applicable)			
<input type="checkbox"/>	Wood	<input type="checkbox"/> Steel	<input type="checkbox"/> Purchased Kit
<input type="checkbox"/>	Other _____		
PRINCIPAL TYPE OF FOUNDATION (If applicable)			
<input type="checkbox"/>	Wood	<input type="checkbox"/>	Concrete
BUILDING DIMENSIONS (If applicable)			
Mean Height _____	Floor Area = _____ square feet	Total Sq. Ft. _____	
I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of the of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.			
A copy of the Ordinance that applies to my project has been given to me!			
Applicant/Owner Signature: _____		Date: ___/___/___	

SITE PLAN

SITE PLAN MUST SHOW THE FOLLOWING:

- The dimensions and actual shape of the parcel
- Frontage on public or private streets or roads
- Location, exterior dimensions (including height) of all existing and proposed buildings and their distance from each other and **all** lot lines
- Sight Line (**lake only**)

----- FENTON TOWNSHIP OFFICE USE ONLY - DO NOT WRITE BELOW THIS LINE -----

Zoning:	
Road Frontage:	
Lot Area:	
% of Lot Coverage:	
Front Yard Setback:	
Rear Yard Setback:	
Side Yard Setback:	
Side Yard Setback:	
Side Setback Corner Lot	
Sight Line:	
Building Height:	
1st Floor Square Footage:	
Setback from structure (detached accessory)	
Accessory Building(s) Square Footage:	

<input type="checkbox"/> Approved	Signature:	_____
<input type="checkbox"/> Not Approved	Title:	_____
<input type="checkbox"/> ZBA Required	Date:	_____

Comments: _____