

TOWNSHIP OF ARCADIA ZONING 7 CAD@5 B7 9 'D9 FA #APPLICATION

Please complete entirely and return to:
 Manistee County Planning Dept. 395 Third St. Manistee, MI
 PH: 231-723-6041 Fax: 231-398-3526 Email: planning@manisteecountymi.gov

- Include a detailed site plan showing the lot with dimensions, proposed construction, setbacks and any natural features on the site.
- You must answer all questions and include all attachments, or this will be returned to you.

DATE SUBMITTED _____

<p>ADDRESS OF CONSTRUCTION LOCATION</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>DESCRIBE YOUR PROJECT</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p>NAME OF PROPERTY OWNER</p> <p>Name: _____</p> <p>Address if different from Construction Location:</p> <p>_____</p> <p>_____</p> <p>Phone (____) _____</p> <p>Cell (____) _____</p>	<p>APPLICANT NAME (if not the property owner):</p> <p>Name: _____</p> <p>Address:</p> <p>_____</p> <p>_____</p> <p>Phone (____) _____</p> <p>Cell (____) _____</p>
<p>PARCEL INFORMATION</p> <p>1. Parcel ID Number: 51-01- _____ - _____ - _____</p> <p>2. Zoning District _____</p> <p>Existing Lot Size (in square footage): _____</p>	<p>PROPOSED NEW PROJECT INFORMATION</p> <p>Total square footage of new building and/or structure _____</p> <p>Proposed setbacks from parcel lines.</p> <p>Front yard _____</p> <p>Rear yard _____</p> <p>Side yards (both) _____</p> <p>Proposed setback from water _____</p> <p>Proposed height of structure _____</p>
<p>APPLICANT SIGNATURE</p> <p>_____</p> <p align="center">Signature Date</p>	

AFFIDAVIT:

I agree the statements made above are true, and if found not to be true, the Zoning ~~Ô[{] |ã) & ^Á^!{~~ Permit may be revoked. Further, I agree the Zoning ~~Ô[{] |ã) & ^Á^!{~~ Permit is issued with the understanding the conditions and regulations contained within this application, and any other applicable sections of the Township Zoning Ordinance, will be complied with. **Also, I agree to notify the Zoning Administrator named below for inspection before the start of construction when locations of proposed uses are marked on the ground.** Further, I understand a Zoning ~~Ô[{] |ã) & ^Á^!{~~ Permit conveys only land use rights, and does not include any representation or conveyance of rights in any other statute, building code, deed restriction or other property rights.

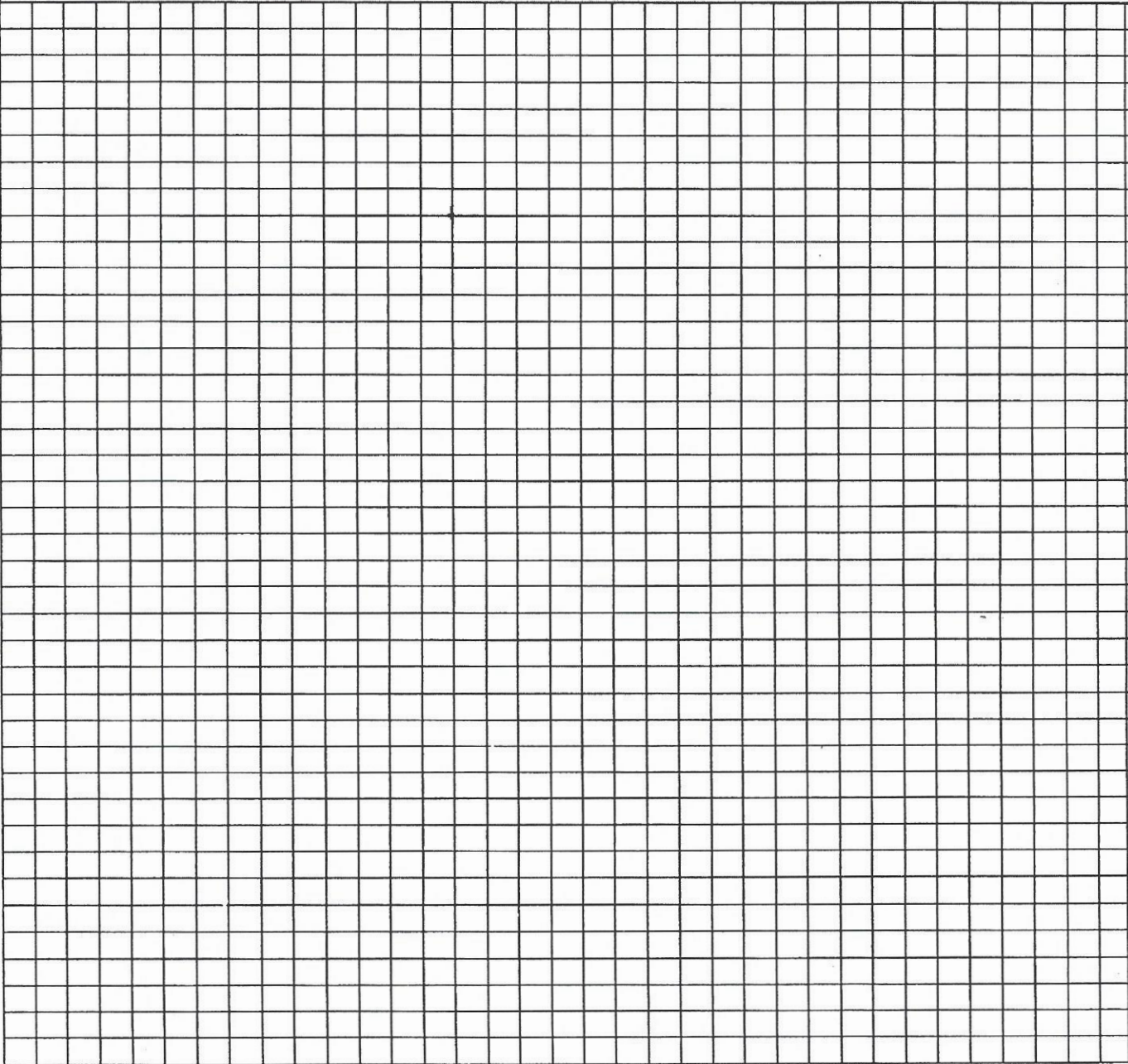
I understand that the Z[} ã * ÁÔ[{] |ã) & ^Á^!{ ã is valid for one (1) year if started within one year of application. This form must be completed and submitted for approval with receipt of a Z[} ã * ÁÔ[{] |ã) & ^Á^!{ ã before a Building Permit can be issued. You must post the Z[} ã * ÁÔ[{] |ã) & ^Á^!{ ã as to be visible from the road during your construction.

Please submit this application and all required documents with payment to the:
Manistee County Planning Department
planning@manisteecountymi.gov or 395 Third St. Manistee, MI 49660
 See Zoning Compliance Permit for all stipulations for development of the requested parcel



***Make Check Payable to:**
Township of Arcadia

SITE OR PLOT PLAN - FOR APPLICANT USE
NORTH



~ IMPORTANT ~

- 1. ROAD FRONTAGE
- 2. PROPERTY DIMENSIONS
- 3. BUILDING DIMENSIONS
- 4. BUILDING SET BACK FROM ALL PROPERTY LINES
- 5. ALL PRIVATE ROADS CONFORMING TO THE ZONING ORDINANCE MUST BE CONSTRUCTED BEFORE PERMIT CAN BE ISSUED.

INSPECTION DATE

Example of a Basic Site Plan

