

ZONING PERMIT APPLICATION

For questions, contact Don Eady, Zoning Administrator
Call (616) 794-1900, Ext. 301 or deady@ci.belding.mi.us

| | | | | | |
|-------------------|-------|---------|------|------------------------------|----------------|
| Fence** (\$25) | Other | Deck*** | Shed | Home Occupation (\$50.00) | Permit # _____ |
|-------------------|-------|---------|------|------------------------------|----------------|

Applicant Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number(s): _____ **E-mail:** _____

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate.

Signature: _____

Date: _____

I hereby grant permission for City of Belding staff to enter the property described above for the purpose of gathering information related to this application. (Note to applicant: This is optional and will not affect any decision on your application)

Signature: _____

Date: _____

Applicant is the: Owner Lessee Optionee Contractor/Architect

Property Owner's Name (if different from applicant): _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone Number(s): _____ **E-mail:** _____

Project Location or Address: _____

Property is: Residential Commercial Industrial **Property zoned:** _____

Permanent Parcel Number: _____

Explanation of Request: _____

***Lot Split:** You must provide 2 copies of a survey showing the current dimensions of the lot & also the proposed split.

****Plot Plan Requirement:** You must provide a plot plan showing the location of property lines, structures, electrical lines, easements, fencing, gates, driveways, pavement, etc. on the subject property. For your convenience, graph lines have been provided on the back of this application, or the plot plan can be attached to the application.

*****Decks:** Please be aware that decks which are more than either one (1) step or eight (8) inches off the ground also require a Building Permit with a Zoning Permit.

TO BE COMPLETED BY CITY

Date application and fee received: _____

Staff Initials: _____

Receipt #: _____

Reviewed by: _____

Zoning Administrator

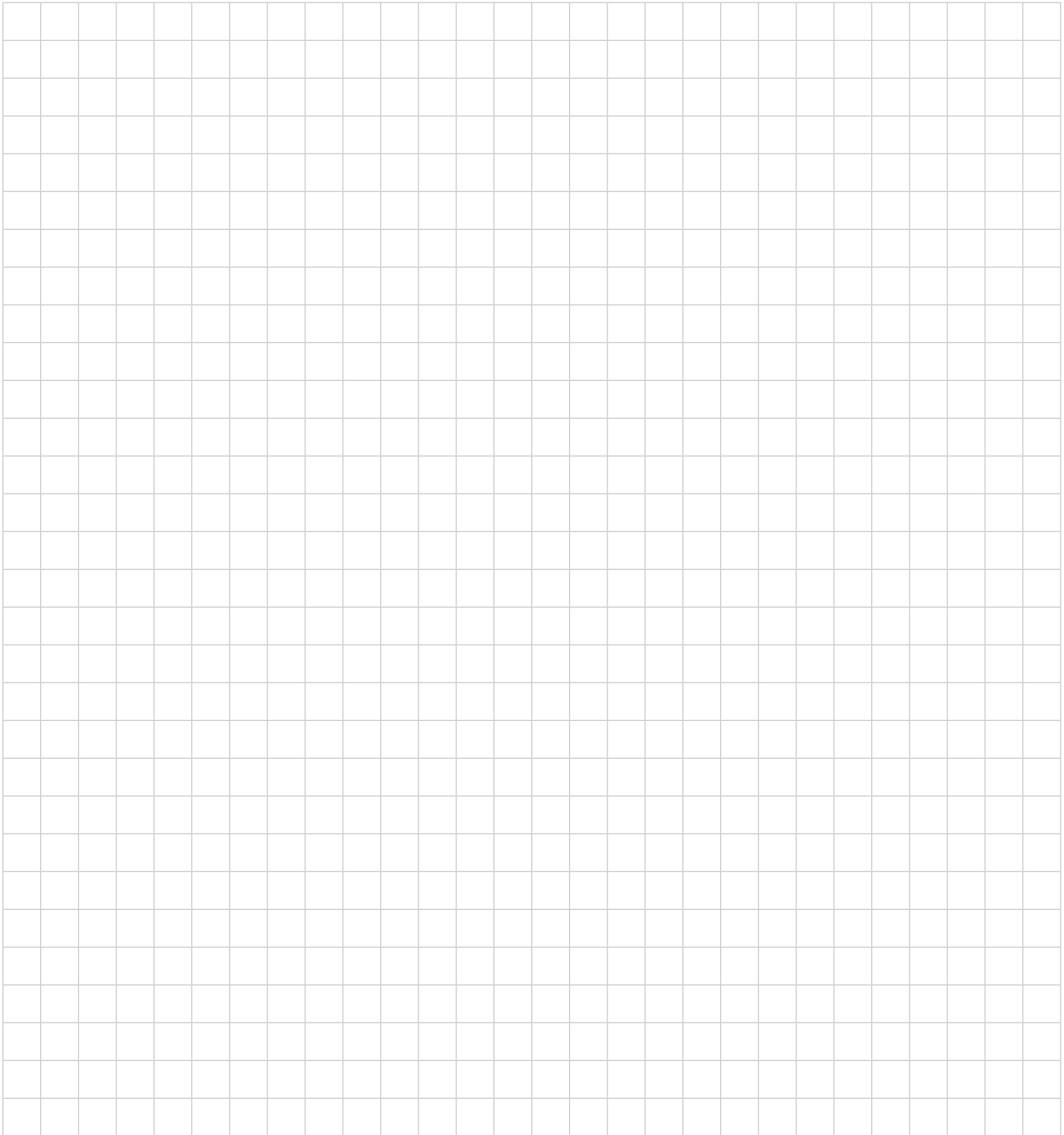
Date

Director, Department of Public Works

Date

Plot Plan

(Remember to show streets, all structures, easements, fences, gates, pavement, electrical lines & property lines)



Sample of Plot Plan:

