

Application for a Zoning Permit

Shiawassee County Community Development Department
 Surbeck Building, 3rd Floor
 201 N. Shiawassee Street, Corunna MI 48817
 Phone: (989) 743-2396 Fax: (989) 743-2393
 Email: comdev@shiawassee.net

App. Date: _____ Receipt # _____ Fee: \$ _____ Permit # _____

Review Date: _____ Approved _____ Denied By: _____

Property Address/Location		Applicant (if not Owner)		
Address/Street: _____		Name: _____		
Nearest Cross Road: _____		Address: _____		
Township: _____		City/State/Zip: _____		
Parcel Number: _____		Phone: _____		
Zoning District: _____		Fax/Email: _____		
Owner Information		If New Construction or Addition		
Name: _____		Please Attach All That Apply: Land Division Certificate Survey Proof of Ownership Septic Permit # _____ Well Permit # _____ Driveway Permit Soil Erosion Permit New Address		
Address: _____				
City/State/Zip: _____				
Phone: _____				
Fax/Email: _____				
Type of Request		Yes	No	For All Applications
Principal Structure				Did you attach a "Site Plan Drawing"?
Accessory Structure				Are you making grade (earth) changes?
Agricultural				Are you creating a pond?
Temporary Structure/Use				Is your project within 500ft. of surface water?
Demolition Permit				Is your project exclusively for agricultural use?
Sign				Is this site currently violating the Ordinance?
Home Occupation		For Sign Permits Only		
Pond and/or Grading		Type of Business: _____		
Deck or Porch		Total display area in square feet: _____		
Pool		Proposed setback from Right-of-Way: _____		
Private Kennel		Sign height: _____ Sign purpose: _____		
Outdoor Solid Fuel Furnace		Type: Pole Ground Wall Other		
Shared Driveway		Height and width of wall: _____		
Buildable Lot Study		Attach sign drawing showing copy		
Hazardous Material Storage				
Other:				

Describe Proposed Building or Land Use:

AFFIDAVIT OF COMPLIANCE

I am the owner of, or the authorized agent of the owner, of the lot (parcel of land) described and shown on the attached site plan. I am familiar with the Shiawassee County Zoning Ordinance, including the related laws listed in Section 16.5.3. I hereby attest based upon my knowledge and belief that this request is complete, in compliance with, and warrants approval under the Shiawassee County Zoning Ordinance of 1999, as amended.

Signature of Applicant

Date