TOWNSHIP OF BIG PRAIRE APPLICATION FOR ZONING COMPLIANCE PERMIT

	Application #:				
1.	Applicant(s) Name:				
	Address:				
		Telep			
2.	Applicant(s) is/are \Box owner(s) \Box Agent of the owner(s) of the property involved.				
3.	. Address of the property involved: \Box Same address as above				
	Address:				
	Address:				
4.	Parcel number of the property involved:				
5.	Application is hereby made by	y the undersigned for: Zoning p	permit for:		
	□ Construct new building	\Box Add to existi	\Box Add to existing building		
	\Box Alter existing building	\Box Relocate existing building			
	□ Install satellite antenna	🗆 Install manu	factured bldg.		
	\Box Install sign or billboard	\Box Other			
	□ Temp permit for residential	□ Tent/Travel ′	□ Tent/Travel Trailer/Camper		
	□ Install mobile home (see mobile home ordinance)				
6.	Type of building:	Proposed use:			
7.	Present zoning district:				
8.	Lot area acres/sq ft:	Average lot width:ft.		ft.	
9.	Zoning setback requirements:				
	Location	Minimum Feet	Actual Feet		
	Rear yard				
	Side yard				
	Front yard				
	Water's edge (normal)				
	River or stream bank				

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- 10. Is site plan attached: \Box Yes \Box No
- 11. Building height: ______ stories or ______ feet
- 12. Dimensions of building: ______ X _____ Total floor area sq ft: _____
- 13. Distance between buildings: _____
- 14. Off-street parking spaces: _____
- 15. Value of structure: \$_____
- 16. I/We the undersigned being the owner, builder or contractor, do guarantee that I/We will comply with all the requirements of the Big Prairie Township Zoning Ordinance and all its amendments. I/We also understand that any violation of this ordinance shall cause me/us to be subject to a fine after issuance of a Citation by Big Prairie Township. This Zoning Permit expires twelve (12) months from the date of issuance if construction has not begun. I/We also agree to all inspection of the property by duly designated Big Prairie Township and/or Newaygo County building inspectors and/or officials.
- 17. I/We do hereby swear that the above information is true and correct to the best of my/our knowledge.

Date: _	 _20	Signature:
Date:	_20	Signature:
	 To	wnship Office Use Only

A Zoning Compliance Permit for the proposed use of said property is hereby:

□ Granted	\Box Referred to Planning Commission

	\Box Referred to Board of Appeals
for the following reasons:	

Date: _____ 20____ Signature: _____

Zoning Administrator, Big Prairie Township

Do not separate copies until all requires are granted or denied.

Distribution: 1. Township Clerk 2. Zoning Administration. 3. Building Official 4. Applicant

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