

Athens Township Zoning Permit

130 East Burr Oak
P.O. Box 368
Athens, MI 49011
Phone (269) 729-5305 Fax (269) 729-5612

Please submit the Zoning Application Fee of \$50.00 with this application
Please Make Checks Payable to **Athens Township**

Please Print or Type

Date: _____

Permit Number: _____

Name of person requesting zoning: _____

Check# _____

Date Paid: _____

Address: _____

Phone: _____ Email: _____

Owner Name: _____

Address for zoning request: _____

Owners Phone: _____ Owners Email Address: _____

Parcel Number: _____

Number of Acres: _____ Please provide dimensions of structure. _____

Type of Building: _____

Please note intended use of building or addition to be added to existing building.

Approved: YES NO Date: _____

Zoning Administrator: _____

Site Plan Examination

Zoning District _____ Use _____

Front Yard Setback _____

Side Yard Setback _____

Rear Yard Setback _____

FINAL APPROVAL _____

Please fill out the site plan drawing on the back side of this form. Measurements must be shown from the closest point of the proposed construction to the two (2) closest property lines. If a measurement is taken from the roadway, se measurement from the centerline of the road.

Zoning Approval Application- Site Plan

Site or Plot Plan-For Applicant Use

INDICATE DISTANCE FROM PROPERTY LINE, EXCLUDING ROAD RIGHT OF WAY. DO NOT MEASURE FROM EDGE OF ROAD. IF A MEASUREMENT IS TAKEN FROM ROADWAY, USE MEASUREMENT FROM THE CENTERLINE OF ROAD. YOU MAY SUBMIT A MORTGAGE SURVEY DRAWING IN LIEU OF THIS PLAN. SHOWING LOCATION OF NEW IMPROVEMENT(S). AN INCORRECT MEASUREMENT WHICH RESULTS IN PLACEMENT OF IMPROVEMENT(S) IN VIOLATION OF THE MUNICIPALITY'S ZONING ORDINANCE MAY RESULT IN REMOVAL OF THE IMPROVEMENT. PLEASE INDICATE THE HEIGHT OF IMPROVEMENT.
