

Permit No. _____

Application for Building Permit

ZEELAND CHARTER TOWNSHIP

OTTAWA COUNTY, MICHIGAN

Application is hereby made under the terms and conditions of the Zeeland Charter Township Zoning Ordinance for:

Erection	<input type="checkbox"/>	One family residence	<input type="checkbox"/>	Agricultural	<input type="checkbox"/>
Addition	<input type="checkbox"/>	Two family residence	<input type="checkbox"/>	Commercial	<input type="checkbox"/>
Alteration	<input type="checkbox"/>	Barn <input type="checkbox"/>	Acc. Bld. <input type="checkbox"/>	Industrial	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	Residential	<input type="checkbox"/>

Owner: _____

Location of property: _____

Lot area: _____ Zone: _____ Sec.: _____

Permit for: _____

Value of construction: _____ (Note: true value or cost, whichever is larger)

Front: _____ R.O.W. Rear: _____ Left side: _____ Right side: _____

Overall length of building: _____ Overall width of building: _____

Number of stories: _____ Height: _____ Depth of basement: _____

Describe type of building, material, construction, etc. : _____

Fireplace: _____ Extra chimney: _____ Walkout basement: _____

To be wired for electricity: _____ Plumbing installed for: _____

Intended use of building: _____

Name of contractor: _____ License No.: _____

Contractor phone number: _____ Plans & spec. submitted: _____

Date of application: _____ Date work will begin: _____

The undersigned makes this application, stating the above to be true; understanding this is an application; and that work is not to commence until this application is approved; knowing that the burden is on the applicant to notify the Zoning Administrator at three stages:

1. After the footing and walls are damp proofed and tiled prior to backfill
2. Upon completion of frame, roof shingles, side wall sheathing, rough electrical, mechanical & plumbing, and before insulating & lathing.
3. Upon total completion.

NAME OF APPLICANT

Fee of \$ _____ received

ADDRESS

TOWNSHIP ZONING ADMINISTRATOR

PHONE NUMBER

Permit No.: _____