



ZONING PERMIT APPLICATION

Application Date: _____

PLEASE PRINT:

Property Owner: _____ Street/City: _____
Job Address: _____ Phone: _____
Property Number: 11-01- _____ - _____ - _____ - _____ Zoning District: _____

CONTRACTOR INFORMATION

Contractor Name (DBA): _____ Phone: _____
License Number: _____ Expiration Date: _____
Federal Employer Number: _____
Worker Compensation Insurance Carrier: _____
MESC Employer Number: _____ Email: _____

WORK TO BE DONE:

____ New ____ Addition ____ Alteration ____ Repair ____ Demolish ____ Move/Other
Submit copies of: ____ Plot Plan ____ Bldg Plan ____ Sewage Plan ____ Soil Erosion Permit
*Driveways 300' or longer must have 16' clear path, with a 12' width x 6" thick base material.
Building Detail: ____ Height ____ Width ____ Length ____ Stories ____ Square Ft.
Set Backs: ____ Front ____ Rear ____ Side ____ Side
Estimated Cost of Construction: \$ _____

APPLICANTS SIGNATURE: _____

"Section 23A of the State Construction Codes Act of 1972 , Act No. 230 of the Public Acts of 1972, being section 125.1523a of the Michigan Compiled Laws prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subject to civil fines of not less than \$100.00 nor more than \$500.00."

Signature of Applicant: _____ Date: _____ (Must be signed)

HOMEOWNERS AFFIDAVIT: For Agriculture Farm Exemption Only

I hereby certify the building work described on this zoning application shall be installed by me on my property which is zoned agriculture and that the structure will be for agricultural use. All work shall be installed in accordance with the Michigan Building Code as adopted by Bainbridge Township. No required building permit or inspection.

Signature of Homeowner: _____ Date: _____

OFFICE USE ONLY

Special Conditions: _____ Permit No.: _____
Zoning Admin.— ROSS ROGIEN Phone # for Inspections: 269-468-8040/ leave message in mailbox 14 Permit Fee: _____
Permit Received By: _____ Date: _____ Receipt #: _____
Rev 03.11.2021