

ZONING COMPLIANCE PERMIT APPLICATION

Au Train Township
Planning and Zoning Department
PO Box 33
Au Train MI 49806-0033
Phone: (906)892-8265

www.austraintownship.org

Total Fee - \$50.00
Payable to: Au Train Township
Receipt# _____
Date Pd. _____

Zoning Administrator: ~~XXXXXXXXXXXX~~ (906)202-9255 austrainzoning@gmail.com
Acting Zoning Administrator: Clerk Mary Walther Johnson (906)361-2373 eff 11/2018

PROJECT IDENTIFICATION

Date of Application: _____ Zoning District: _____ Parcel ID: _____
Project Location: _____ Project Name (if any): _____

APPLICANT	
Name: _____	
Address: _____	
City/State/Zip: _____	
Phone # _____ Fax # _____	

PROPERTY OWNER	
Name: _____	
Address: _____	
City/State/Zip: _____	
Phone # _____ Fax # _____	

If the applicant is other than the owner, the owner hereby grants permission for the applicant to act in his/her behalf.

OWNER SIGNATURE: _____ DATE: _____

Additional Property Information	
Estimated project Costs: \$ _____	Does this involve a Land Contract Sale? _____
Will the structure be used for Agricultural purposes (specify)? _____	
Square Footage of Existing Dwelling _____	Square Footage of Existing Accessory Building (s) _____
Number of off street parking spaces: Enclosed _____ Outdoors _____	
Is the property accessed by a private road? _____	
Lot Area (Sq ft or Acres): _____	Lot width: _____ Sq Ft Area to be disturbed: _____

Legal Description of Property (attach if necessary)

Please note: This is not a Construction of Building Permit. If a Zoning Permit is granted, a copy will be forwarded to the Alger County Building Codes Department on your behalf. You will need to pursue all other applicable permits. A copy of the current Au Train Township Zoning Ordinance is available and more information provided, by visiting www.austraintownship.org > Documents > Zoning, or contact the Au Train Township Zoning Administrator.

CONSTRUCTION PROPOSED: RESIDENTIAL

(check all that apply)

- One Family - new
- One Family - alteration or addition
- Two Family - new
- Two Family – alteration or addition
- Multi Family - new
- Multi Family - alter, addition, or increase units
- Group Residential, more than 4 unrelated individuals

Story Height _____ Height at Peak _____

Sq Ft Proposed Building _____ # of stories _____

(Circle applicable): Basement Crawl Space Slab

Basement above or below ground? _____

ACCESSORY STRUCTURE

(garage/shed/other)

Describe proposed use of the structure:

What utilities (are / will be) available in the accessory structure?

- Electricity
- Water
- Sewer
- Heat (Circle applicable): gas wood electric other _____

Height at Eaves _____ Height at Peak _____

Is this a Pole Building? _____ Sq Ft of Structure _____

PROPOSED USE: NON-RESIDENTIAL

(check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Warehousing (storage) | <input type="checkbox"/> Food & Beverage Service |
| <input type="checkbox"/> Office | <input type="checkbox"/> Institutional |
| <input type="checkbox"/> Retail | <input type="checkbox"/> Outdoor Service/Sales |
| <input type="checkbox"/> Personal Services | <input type="checkbox"/> Automotive Services |
| <input type="checkbox"/> Assembly (describe) _____ | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Outdoor Storage (describe) _____ | |
| <input type="checkbox"/> Public Use (describe) _____ | |

Height at Eaves _____ Height at Peak _____

Is this a Pole Building? _____ Sq Ft of Proposed Structure _____

Will there be outside storage (specify sq ft area, location on lot, storage height, materials) _____

If there are accessory structures associated with this non-residential use, please fill out accessory use section above. A site plan will be required for all non-residential developments per requirements of Section IX of the Zoning Ordinance.

DESCRIPTION OF PROJECT (use, building style and materials, ultimate ownership, proposed phases and timelines, etc)

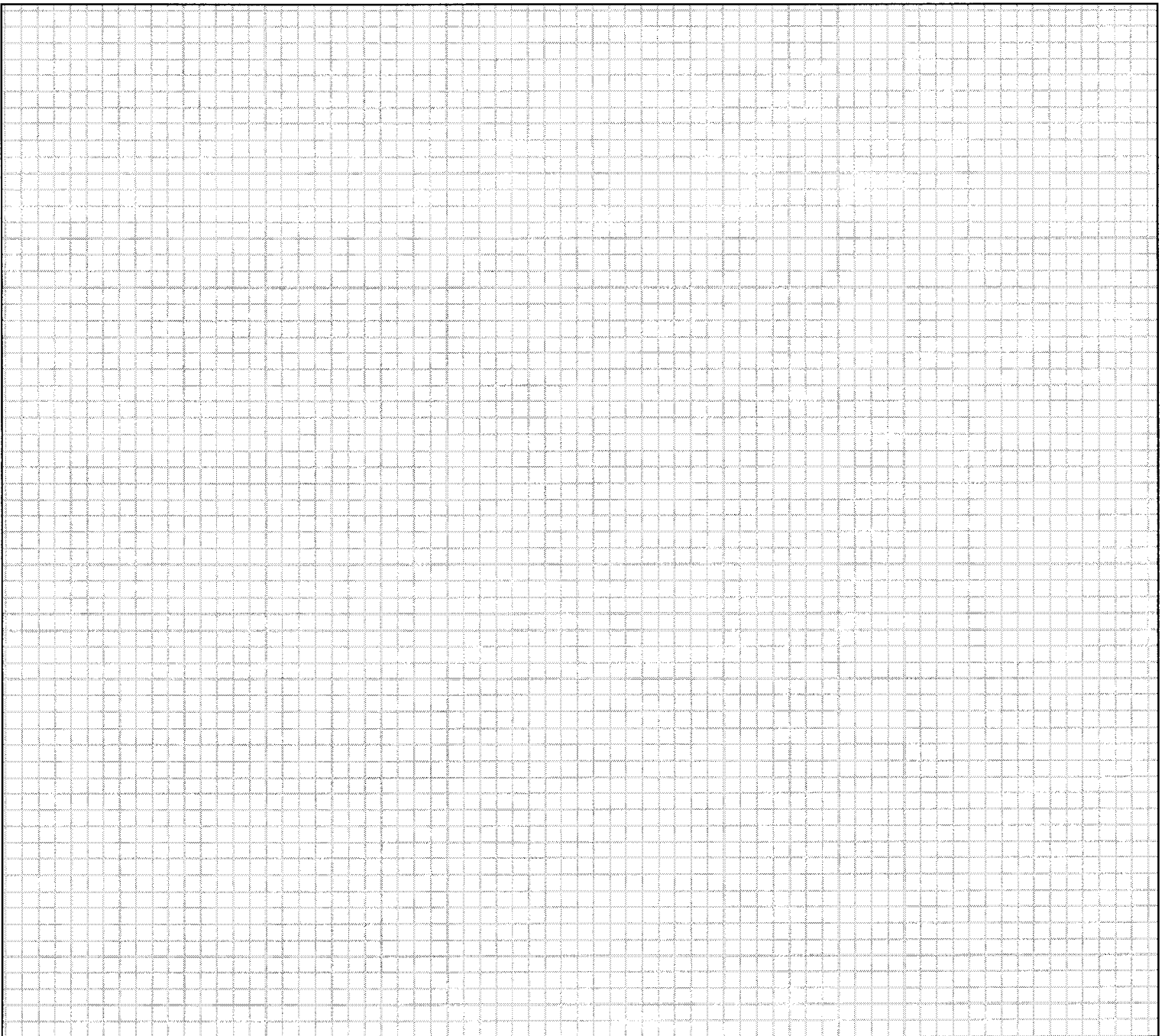
NO WORK – INCLUDING EARTHWORK – MAY COMMENCE UNTIL THIS APPLICATION IS APPROVED.

PROVIDE A SITE PLAN DRAWN TO SCALE; ATTACH A SEPARATE SHEET IF NEEDED

(Site plans for Commercial, industrial, and multi-family structures must be drawn by and sealed by a licensed architect, engineer, or surveyor.)

The following information SHALL be sufficiently detailed on this SITE PLAN so that the reviewer can verify Zoning Compliance.

- | | |
|---|--|
| 1. All property lines and lot dimensions. | 7. North arrow |
| 2. Yard dimensions, structure setbacks | 8. Significant topographical features |
| 3. Adjoining rights-of-way locations/dimensions | 9. Water courses and wetlands |
| 4. Location, dimensions, separation of all structures | 10. Sanitary and well facilities and utilities |
| 5. All driveway and curb cut location/dimensions | 11. Utility and other easements |
| 6. All required parking spaces | |



ZONING COMPLIANCE PERMIT APPLICATION INSTRUCTIONS

1. No construction in any district shall be begun, enlarged or extended or any work commenced that will change the present use of any structure without a Zoning Compliance Permit issued by the person designated by the Township Board. No mobile home, replacement mobile home, or extension thereof, shall be placed on any lot without the required Zoning Compliance Permit.

2. Every applicant for a Zoning Compliance Permit shall state in writing the intended use of the building or structure, and shall furnish a sketch, survey, or other drawing in such scale and detail as may be required by the person charged with issuing the Zoning Compliance Permit which shall show the lot shape, dimensions, and indicate the size, shape, and location (distance from all property lines) of all buildings, easements, rights-of-way, significant topographical features, and proposed and existing driveways and landscaping.

3. A Zoning Compliance Permit shall expire 12 months from the date of issuance unless there has been substantial progress for which the Permit was issued.

• I hereby certify that the proposed work is authorized by the owner of record, and that I have been authorized to make this application. I further certify that the proposed plans as shown are accurate to the best of my knowledge and contain an accurate legal description and specifications for all existing and proposed buildings or structures.

• I understand that this application does not cover all permits required by Alger County or the State of Michigan, and that other permits may be necessary before occupancy.

• I, the applicant/owner, agree that issuance of the Zoning Compliance Permit based upon this application carries with it a condition allowing on-site inspection of the premises, both in review of the site plan and later to confirm compliance with the site plan. As applicant/owner, I authorize these inspections and acknowledge that they are a material condition to any approval provided with the application.

• I, the applicant/owner, further understand that any construction which represents a variance from the approved site plan, or violation of the approved site plan, may result in a STOP NOTICE issued by the Zoning Administrator. Upon service of such notification, I, the applicant/owner and my agents agree to immediately cease work on that portion of the property identified as a violation.

• I acknowledge review of the site plan and other applicable requirements in the zoning ordinance (available at www.austraintownship.org or Au Train Township Hall, N7569 Spruce Street, Au Train MI 49806).

• I, THE APPLICANT/OWNER, FURTHER AGREE THAT NEITHER ME NOR MY SUCCESSOR WILL SELL, CONVEY, OR OTHERWISE DISPOSE OF ANY LAND SURROUNDING A STRUCTURE IF SUCH TRANSACTION WILL RESULT IN THE STRUCTURE BEING LEFT ON A LOT WHICH FAILS TO MEET THE MINIMUM REQUIREMENTS SET FORTH IN THE TOWNSHIP ZONING ORDINANCE.

Owner/Agent Signature: _____ **Name (Print) :** _____

OFFICE USE ONLY Permit #ZC- _____ - _____ (Year + Tax ID Number)

DISAPPROVED _____ APPROVED _____

Conditions of Approval: _____

Date _____ Zoning Administrator Signature _____

DS
MWJ