

TOWNSHIP OF ARCADIA ZONING 7 CAD@5 B7 9 'D9 FA #APPLICATION

Please complete entirely and return to:
 Manistee County Planning Dept. 395 Third St. Manistee, MI
 PH: 231-723-6041 Fax: 231-398-3526 Email: planning@manisteecountymi.gov

- Include a detailed site plan showing the lot with dimensions, proposed construction, setbacks and any natural features on the site.
- You must answer all questions and include all attachments, or this will be returned to you.

DATE SUBMITTED _____

ADDRESS OF CONSTRUCTION LOCATION _____ _____ _____ _____	DESCRIBE YOUR PROJECT _____ _____ _____ _____
NAME OF PROPERTY OWNER Name: _____ Address if different from Construction Location: _____ _____ _____ Phone (____) _____ Cell (____) _____	APPLICANT NAME (if not the property owner): Name: _____ Address: _____ _____ _____ Phone (____) _____ Cell (____) _____
PARCEL INFORMATION 1. Parcel ID Number: 51-01- _____ - _____ - _____ 2. Zoning District _____ Existing Lot Size (in square footage): _____	PROPOSED NEW PROJECT INFORMATION Total square footage of new building and/or structure _____ Proposed setbacks from parcel lines. Front yard _____ Rear yard _____ Side yards (both) _____ Proposed setback from water _____ Proposed height of structure _____
APPLICANT SIGNATURE _____ <p align="center">Signature Date</p>	

AFFIDAVIT:

I agree the statements made above are true, and if found not to be true, the Zoning ~~Ô[{] |ã) & ^Á^' {~~ Permit may be revoked. Further, I agree the Zoning ~~Ô[{] |ã) & ^Á^' {~~ Permit is issued with the understanding the conditions and regulations contained within this application, and any other applicable sections of the Township Zoning Ordinance, will be complied with. **Also, I agree to notify the Zoning Administrator named below for inspection before the start of construction when locations of proposed uses are marked on the ground.** Further, I understand a Zoning ~~Ô[{] |ã) & ^Á^' {~~ Permit conveys only land use rights, and does not include any representation or conveyance of rights in any other statute, building code, deed restriction or other property rights.

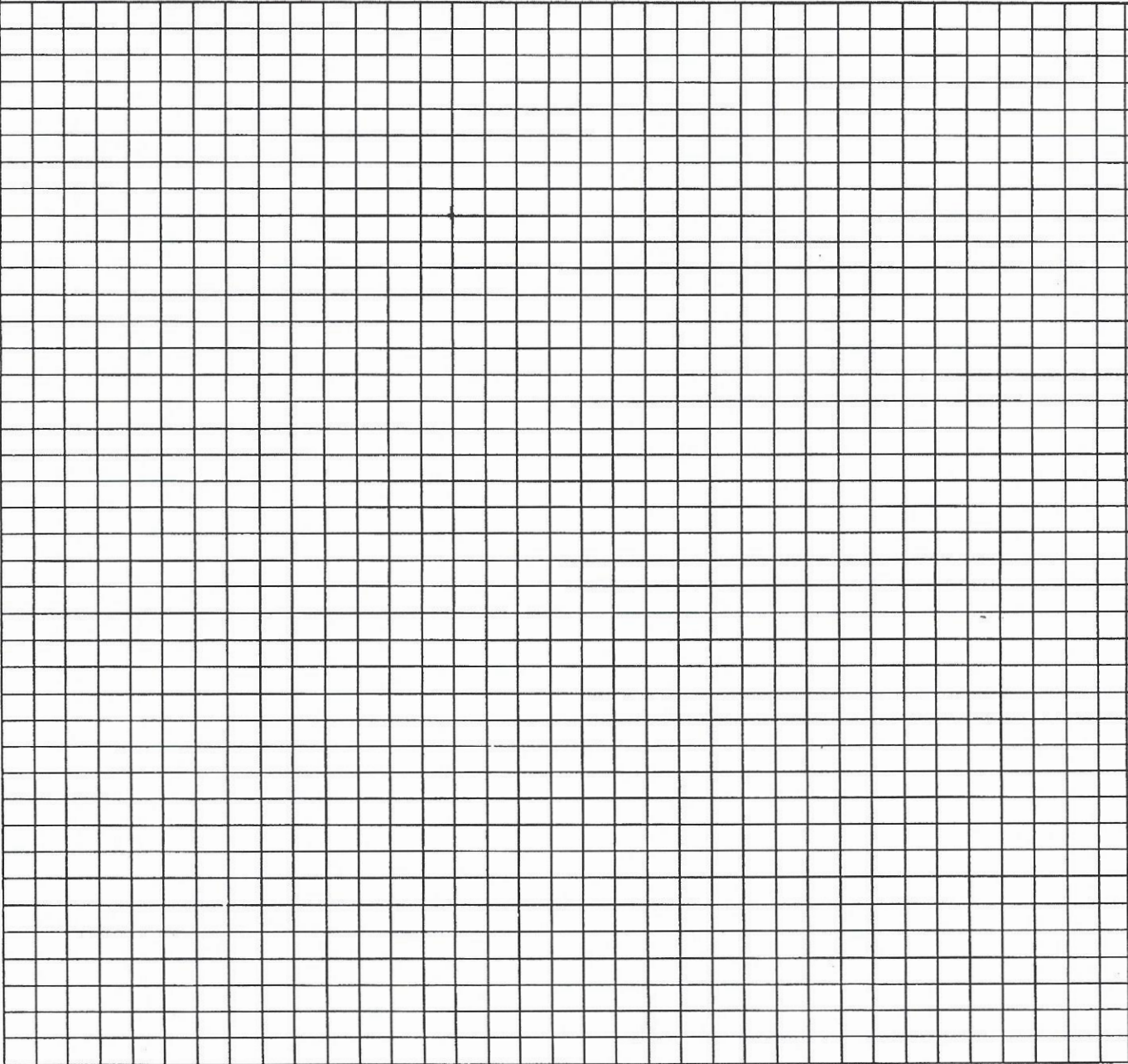
I understand that the Z[} ã * ÁÔ[{] |ã) & ^Á^' { ã is valid for one (1) year if started within one year of application. This form must be completed and submitted for approval with receipt of a Z[} ã * ÁÔ[{] |ã) & ^Á^' { ã before a Building Permit can be issued. You must post the Z[} ã * ÁÔ[{] |ã) & ^Á^' { ã as to be visible from the road during your construction.

Please submit this application and all required documents with payment to the:
Manistee County Planning Department
planning@manisteecountymi.gov or 395 Third St. Manistee, MI 49660
 See Zoning Compliance Permit for all stipulations for development of the requested parcel



***Make Check Payable to:**
Township of Arcadia

SITE OR PLOT PLAN - FOR APPLICANT USE
NORTH



~ IMPORTANT ~

- 1. ROAD FRONTAGE
- 2. PROPERTY DIMENSIONS
- 3. BUILDING DIMENSIONS
- 4. BUILDING SET BACK FROM ALL PROPERTY LINES
- 5. ALL PRIVATE ROADS CONFORMING TO THE ZONING ORDINANCE MUST BE CONSTRUCTED BEFORE PERMIT CAN BE ISSUED.

INSPECTION DATE

Empty box for recording the inspection date.

Example of a Basic Site Plan

