SCMCCI

South Central Michigan Construction Code Inspection, Inc. 113 S. Capitol Ave., PO Box 509, Athens MI 49011 Ph:269-729-5355 or Toll Free: 1-888-249-7077 Fx: 269-729-5359

Zoning Permit Application *Inspection Scheduling: 1-877-223-2292*

Office Hours 7:30am to 4:00pm M-F Closed 12:00pm - 12:30pm for lunch

Date:	
Permit#:	
Receipt#:	
Fee:	\$85.00
Method of Payment:	

A fully dimensioned site plan, indicating lot lines, location of all buildings presently on the property and location of the proposed new structure Distances from lot lines and between all buildings must be shown. An inspection will not be scheduled until this site plan has been submitted

APPLICATION MUST BE COMPLETE - INCOMPLETE	APP'S MAY BE RETURNE	D TO THE APPLICANTS	WHICH COULD CAL	JSE DELAY.		
1. JOB LOCATION						
Job Address:		Property Code#				
City/Village	Township	County	Zip Code			
Between	And					
2. APPLICANT INFORMATION (application	MUST be signed)					
Applicant Name	Address:					
City/Village	Township:	County:	Zip Code:			
Home Phone	Work Phone		Fax:	Fax:		
3. TYPE OF JOB						
Construct:New	Alter	Remodel	Addition			
SFH SFH w/att. garage	Pole Barn/Detached Garage		Other	Other		
4. PROJECT DIMENSIONS						
Bldg. WidthBldg. LengthBldg. Height# of floors		Total Sq Ft				
% of Lot Coverage Date of Lot Split	Property size					
5. ZONING QUESTIONS - Please circle yes or no						
Does this property have frontage on two roads?			YES N	10		
Does this property have lake frontage?			YES N	10		
Is there a dwelling presently on this property?			YES N	10		
Is there an accessory building presently on this property?				10		
Is there an easement on this property, (I.e., utility, etc.)				10		
Is this property located in a flood plain?				10		
Is the construction located within 500 ft. of a lake, stream, or natural body of water? YES NO						
Will the construction require the moving of one surface acre or more of land?				10		
If construction is for accessory building (pole bldg) will it contain animals?				10		
6 RESPONSIBILITIES OF APPLICANT						
It is your responsibility to be aware of any dee	ed restrictions, subdivis	ions regulations, floo	d plain regulation	s and		
wetland regulations. I have read, acknowledged, and will comply with all of the above and with the land use						
regulations, as determined by the zoning administrator, or will go to the proper board for a variance if necessary						
7 SIGNATURE OF APPLICANT						
Applicant's Signature	Drivers License #		Date			
7 ' 00' ' 0'						

Zoning Official's Signature