## FREMONT ZONING PERMIT

## DAYTON TOWNSHIP, SHERIDAN CHARTER TOWNSHIP AND THE CITY OF FREMONT ALL ARE PARTICIPATING MUNICIPALITIES IN THE FREMONT COMMUNITY JOINT PLANNING AND ZONING, BUT EACH MUNICIPALITY HAS ITS OWN ZONING PERMIT

Permit Fee \$ _				Permit # _	
Job Location:					NSEW
	Number		Street		Direction
	City		Zip Code		County
Name of Subdivision (if known):		):		Lot	:
Applicant Inf	ormation				
			Phone:		
Applicant's int	terest in project: e interest:	Owner		Lessee	Other
	nation (if other t		Dhono		
			_		
• •	Mark as many as	'		A 11'.'	
	ructure			Addition	
•	family home	•	•	0 0	
-	replacement	-	•	_ Accessory Str	ructure
	ercial building				
	Specify:				
_	e of use from		to		_
Interio	DI WOIK				

List the interior work to be performed.					
Briefly describe project if other than Interior work:					
Parcel Information					
Parcel #: 62					
Zoning district:					
Primary use:					
Circle Type of Use: Residential/Commercial/Industrial/Other					
Size of parcel (acres/sq.ft.):					
Lot of record: Yes or No					
Depth of parcel:					
Width of parcel:					
Required building line (RBL) or front setback, if applicable:					
Side yard setback, if applicable:					
Rear yard setback, if applicable:					
Street side yard setback, if applicable:					
Watercourse (front setback), if applicable:					
Proposed Use - Residential – One and Two Family (check all that apply)					
One family x Two family x & x					
Basement x Deck x					
Porch x Garage x : Attached Y	_ N				
Carport x Other (Specify):					
Modular: Size x Make/Model:					
Year: Serial Number:					
Single Wide Mobile Home: Size x Make/Model:					
Year: Serial Number:					
Double Wide Mobile Home: Size x Make/Model:					
Year: Serial Number:					
Provide approved site plan, if applicable.					

## **Proposed Use – Non residential** Describe nature of the project: \_\_\_\_\_ Provide approved site plan, if applicable. **Project Dimensions and Building Characteristics** Total sq. ft. \_\_\_\_\_ # of floors: \_\_\_\_\_ Total sq. ft. 1<sup>st</sup> floor: \_\_\_\_\_ Total sq. ft. 2<sup>nd</sup> floor: \_\_\_\_\_ Total sq. ft. basement: \_\_\_\_\_ No. of bedrooms: \_\_\_\_\_ No. of baths: \_\_\_\_\_\_ No. of stories: \_\_\_\_\_ No. of buildings: \_\_\_\_\_ No. of units: \_\_\_\_\_ Project height: \_\_\_\_\_ Project length: \_\_\_\_ Project width: \_\_\_\_ List building materials: **Zoning Questions – Please Circle Yes or No** Does this property have frontage on two roads? Yes No Does this property have lake frontage? Yes No Is there a dwelling presently on this property? Yes No Is there an accessory building other than a garage on this property? Yes No Is the construction located within 500 ft. of a lake, stream or natural body of water? Yes No **Cost of Improvements** Comments Building Electrical \$ \_\_\_\_\_ Plumbing \$ \_\_\_\_\_ Mechanical Total: Signature of owner: \_\_\_\_\_\_ Date: \_\_\_\_\_ Print name of owner:

## Statement of Agency (If applicant is other than property owner)

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his agent, and we agree to conform to all applicable laws of the State of Michigan as well as local ordinances. All information submitted on this application is accurate to the best of my knowledge.

Signature of Agent/Applicant	Print Name	
Title of Agent	Date	
Please return the Fremont Zoning Per	mit to:	
City of Fremont		
101 E. Main Street		
Fremont, MI 49412		
231-924-2101 (Phone)		
231-924-2888 (Fax)		
Approved Permit # Permit fee:	ce (please check one) Required Not required Date: or N/A Date of variance, if applicable:	
Signature of City Zoning Official:		
Title:		
Building permit #:	Other permit # (e.g., electrical):	