



ZONING PERMIT
Form must be filled out in its entirety

CONTACT INFORMATION

Owner:	Contractor/Applicant:
Mailing Address:	Mailing Address:
Phone:	Phone:
Email:	Email:

PROPERTY INFORMATION

Improvement Address:	Property Code:		
Subdivision:	Block:	Lot(s):	Zoning District:
Cross Streets:	<input type="checkbox"/> Interior Lot <input type="checkbox"/> Corner Lot		
Present Use of Property: <input type="checkbox"/> Vacant <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Other			
Is the property located in a floodplain or wetland area? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If yes, please check with the Zoning Administrator for additional requirements.</i>			

TYPE OF IMPROVEMENT

<input type="checkbox"/> Residential <input type="checkbox"/> Commercial		Improvement Cost:
<input type="checkbox"/> new construction	<input type="checkbox"/> garage	<input type="checkbox"/> shed
<input type="checkbox"/> addition/expansion	<input type="checkbox"/> deck	<input type="checkbox"/> fence
<input type="checkbox"/> demolition (Applicant is responsible for disconnection of all utilities.)		<input type="checkbox"/> other (specify)
<input type="checkbox"/> new business (include paragraph about business)		new business name

SIZE AND SETBACK INFORMATION

Lot Size:	Distance From Other Structures (if applicable):	
Front Yard Setback:	Rear Yard Setback:	Improvement Height:
Side Yard Setback:	Side Yard Setback:	Percentage of Lot Coverage:

SITE OR PLOT PLAN

(Authority - Michigan PA 110 of 2006, as amended) Please attach a description of the request and/or sketch of the improvement, along with any additional documentation required in accordance with Article 22 of the Zoning Ordinance. It is the property owner's responsibility to ensure setback requirements are met; a survey is recommended to verify property line locations. Improvements cannot direct runoff to adjacent properties; structures and obstructions over service lines or easements are the property owner's responsibility and are not recommended.

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Owner:	Contractor/Applicant:
Improvement Address:	Property Code:

AFFIDAVIT

I agree that the statements and information above and submitted with this application are true, and if found not to be true, any permits that may be issued may be void. I agree to comply with the conditions and regulations provided with any permit that may be issued. I agree that the permit that may be issued is with the understanding that all applicable sections of the City of Tawas City Zoning Ordinance will be complied with. I agree to contact the Tawas City Zoning Administrator for inspection before the start of construction and when locations of proposed uses are marked on the ground. I agree to give permission for officials of the City of Tawas City, the County of Iosco, and the State of Michigan to enter the property subject to this permit application for purposes of inspection. I understand that, if issued, this 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.

In consideration of the granting of this permit, I agree to comply with all applicable ordinances of the City of Tawas City, and the City shall not be liable for any damages resulting therefrom.

Property Owner's Signature

Date

Applicant's Signature

Date

Zoning Administrator's/Planning Commission's Approval

Date

Additional permits may be required from:

- Iosco County Building Department
- MI Dept. of Environmental Quality
- MI Dept. of Transportation
- other _____