

# Charter Township of AuSable

4420 N. US 23

AuSable, Michigan 48750

Telephone: (989) 739-9169 / Fax: (989) 739-0696

E-mail: hall@ausabletownship.net Website: www.ausabletownship.net

## ZONING PERMIT APPLICATION – COMMERCIAL- ACCESSORY BUILDING, (ADDITION TO BUILDING, DRIVEWAY, FENCE). Use Permitted by Right or Special Land Uses

This application is used for all residential plot plan applications except for fence and sign permits which have their own application form. Applications will be processed within five **(5)** working days (schedule and workload permitting). The Zoning Ordinance is available on the Township's website [www.ausabletownship.net](http://www.ausabletownship.net). Permit if valid for one year

Fee Paid \$25.00  (check)

Owner and Address of Property:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number of Owner:

Residence: \_\_\_\_\_

Work place: \_\_\_\_\_

Cell: \_\_\_\_\_

Owner Mailing Address:  
(If different)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Address of Applicant:  
(If different than owner)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

### FOR TOWNSHIP USE ONLY

Permit Number: \_\_\_\_\_ Date: \_\_\_\_\_ Comments: \_\_\_\_\_

Date Received: \_\_\_\_\_

Complete Application Received (date): \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Zoned: \_\_\_\_\_

Fee Received: \_\_\_\_\_

Fee Receipt Number: \_\_\_\_\_

Action taken on \_\_\_\_\_ (date): \_\_\_\_\_

(Circle below as appropriate)

Approved  
Plot Plan

Approved  
Plot Plan with Conditions

Denied  
Plot Plan

\_\_\_\_\_  
Zoning Administrator

\_\_\_\_\_  
Date

**ZONING PERMIT APPLICATION – COMMERCIAL**

**Requirements:**

- Complete all application sections including Plot Plan Drawing.
- Signature in all designated locations.
- Owner’s signature when the applicant is not the owner is required.
- Property staking completed.

**Description of Accessory Building:**

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**Additional Submittals** (If Applicable)

- A complete set of drawings and plans for proposed new construction.
- DEQ Permit (if applicable)

**Application Information**

Structure #1, consisting of \_\_\_\_\_

_____ feet from front lot line	_____ feet from left side lot line	_____ stories
_____ feet from rear lot line	_____ feet from right side of lot line	_____ roof pitch
_____ square feet of gross floor area	_____ feet in height	
_____ feet in length	_____ feet in width	

**PART 5: AFFIDAVIT**

I (we) the undersigned affirm that the foregoing answers, statements, and information are in all respects true and correct to the best of my (our) knowledge and belief. I (we) the undersigned understand that the approval applied for, if granted is issued on the representations made herein and that any permit subsequently issued may be revoked because of any breach of representations or conditions, or because of the lack of continued conformance with zoning ordinance. Zoning Permits are valid for one (1) year from date of issuance.

\_\_\_\_\_

\_\_\_\_\_

Applicant signature(s)                      Date

\_\_\_\_\_

\_\_\_\_\_

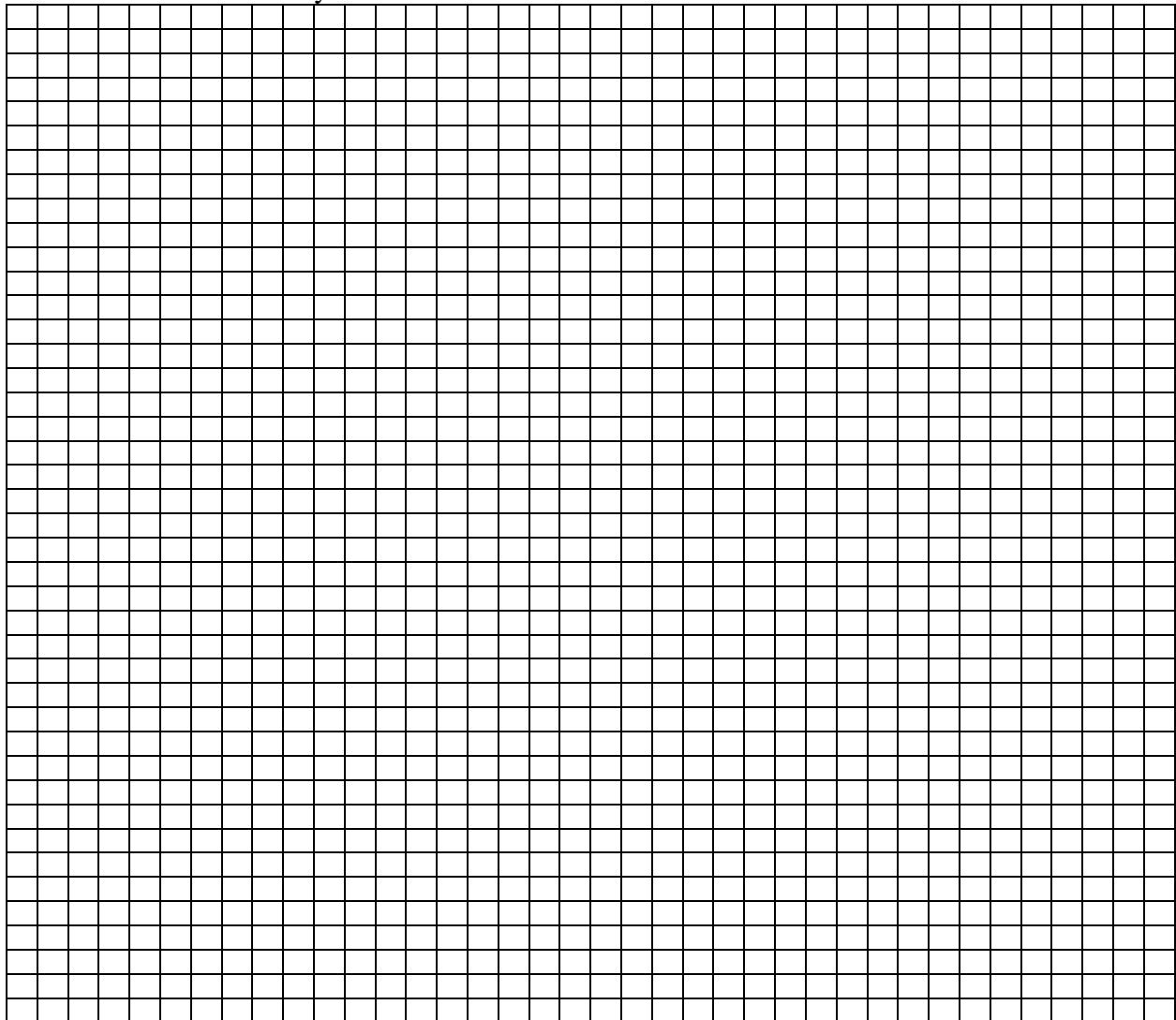
Property Owner’s signature(s)              Date  
(if different than applicant)

### COMMERCIAL PLOT PLAN DRAWING

Drawing must include:

An accurate, readable, **scaled drawing** is required showing the following:

- The shape, area and dimension of the property
- The location and dimensions of all existing and/or proposed structures to be erected, altered or moved on property
- Set backs of all existing and/or proposed structures from all lot lines and dimensions from each other
- Location of any septic system, drain field and well
- Configuration of the driveway and parking, if applicable
- Abutting roads noted
- Attach drawings including layout and elevations for new construction
- Indicate North on your Plot Plan

A large grid for drawing the plot plan, consisting of 30 columns and 30 rows of small squares.

#### APPLICANT CERTIFICATION

“I certify the above drawing prepared above accurately reflects the subject property as surveyed including the height, size, and setback locations of proposed signs.”

\_\_\_\_\_  
Signature (Applicant)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approved Zoning Administrator

\_\_\_\_\_  
Date