

# Charter Township of AuSable

No. T-3

4420 N. US 23

AuSable, Michigan 48750

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

E-mail: [hall@ausabletownship.net](mailto:hall@ausabletownship.net)

Website: [www.ausabletownship.net](http://www.ausabletownship.net)

## ZONING PERMIT APPLICATION – SIGNS

(See Article 22 of the Zoning Ordinance.)

This application must be completed in full. 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 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 Received: \_\_\_\_\_

Date: \_\_\_\_\_ Comments: \_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

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

\_\_\_\_\_

(Circle below as appropriate)

Sign  
Approved

Sign Approved  
With Conditions

Sign  
Denied

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

\_\_\_\_\_  
Date

## ZONING PERMIT APPLICATION – SIGNS

### PART 1: ACTION REQUESTED

#### **Requirements:**

- Complete all application sections including Plot Plan Drawing.
- Attach sign drawings including dimensions, installation dimensions and wording.
- Signature in all designated locations.
- Owner's signature when the applicant is not the owner, is required.

#### **Sign Type:**

#	Sign Type	Dimensions	Sign Top Height	Sign Bottom Height	Sign Square Feet
	Ground				
	Wall				
	Temporary				
	Temporary Portable				
	Pole				
	Pylon				
	Off Premise Directional				
	Projecting				
	Marquee				
	Awning/Canopy				
	Other (List) _____				

### 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.

\_\_\_\_\_  
\_\_\_\_\_  
Applicant signature(s)                      Date

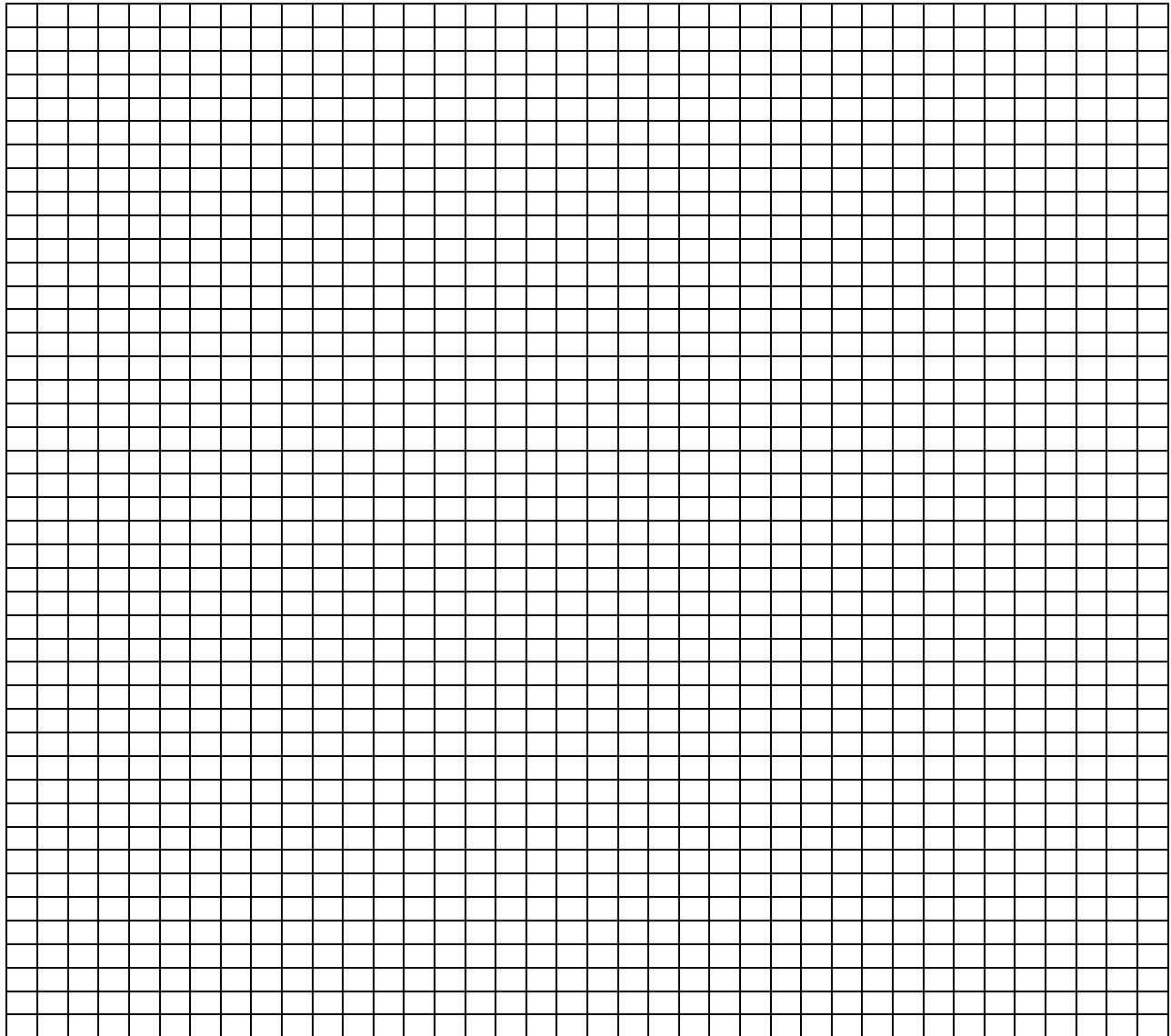
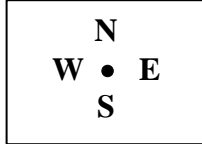
\_\_\_\_\_  
Property Owner's signature(s)            Date  
(if different than applicant)

## 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 existing structures on property
- Location of sign(s)
- Set backs of the signs from all lot lines
- All abutting roads noted



## 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