

# Charter Township of AuSable

C-11

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/INDUSTRIAL SITE PLANS Use Permitted by Right or Special Land Uses

### PLANNING COMMISSION APPROVAL

Commercial applications require Planning Commission review and approval. The attached application and site plan shall be used for all Zoning Permit Applications. Applications must be received **19** days prior to the Planning Commission meeting, which is typically held on the **fourth** Wednesday of the month. The Zoning Ordinance is available on the Township's website [www.ausabletownship.net](http://www.ausabletownship.net). Permit is valid for one year

Fee Paid \$100.00  (check)

Special Planning Commission Meeting \$475.00  (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: \_\_\_\_\_

Planning Commission (date): \_\_\_\_\_

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

(Circle below as appropriate)

Approved  
Site Plan

Approved  
Site Plan with Conditions

Denied  
Site Plan

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

\_\_\_\_\_  
Date

**ZONING PERMIT APPLICATION COMMERCIAL/INDUSTRIAL SITE PLANS**

**Planning Commission Approval**

**PART 1: ACTION REQUESTED**

A. Purpose: (check as many as applicable)

\_\_\_\_\_ demolition \_\_\_\_\_ alteration/repair of existing structure

\_\_\_\_\_ establishing new use of existing land  
and/or existing structures

\_\_\_\_\_ other (please specify): \_\_\_\_\_

B. Buildings: \_\_\_\_\_ principal building(s) (insert number)

\_\_\_\_\_ Accessory building(s) (insert number)

C. Description: Please provide a description of the proposed actions being applied for, including any proposed uses of land and/or proposed uses of existing buildings:

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

**PART 4: 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

\_\_\_\_\_

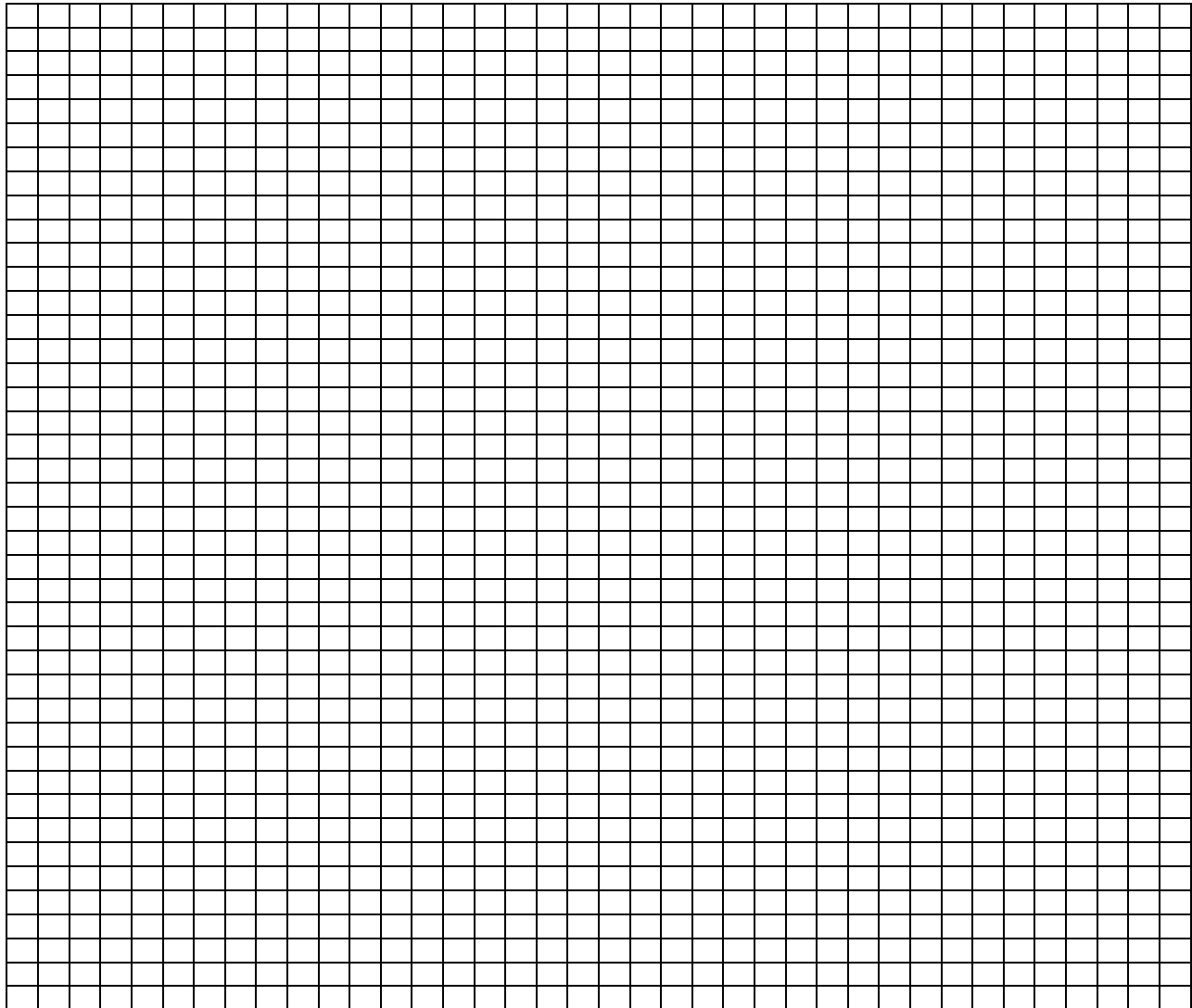
Property Owner's signature(s) Date  
(if different than applicant)

# COMMERCIAL OR INDUSTRIAL 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 if applicable



## 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