

STURGIS TOWNSHIP

ST. JOSEPH COUNTY, MI

SITE PLAN REVIEW

The site plan review has a one-year time limit.

APPLICATION FOR CERTIFICATE OF APPROVAL TOWNSHIP ZONING ORDINANCE

NAME OF APPLICANT(S) _____ DATE _____

1. TAX I.D. NUMBER _____
2. NAME OF PROPERTY OWNER _____
STREET/P.O. BOX _____
CITY, STATE & ZIP _____
3. LOCATION/ADDRESS OF PROPERTY. ATTACH A DIAGRAM SHOWING DIMENSIONS AND LOCATION OF ALL EXISTING AND PROPOSED STRUCTURES

4. LAND USE: (Ag, R-1, R-2, R-3, C-1, C-2,I,R/C) _____
5. LOT SIZE _____
6. BUILDING SIZE _____
7. LOCATION OF BLDG. ON LAND:
FEET BACK FROM ROADWAY _____
FEET BACK FROM REAR LOT LINE _____
FEET FROM SIDE YARD _____
8. TYPE OF WORK OR STRUCTURE _____
9. ESTIMATED COST OF WORK _____
10. PURPOSE FOR WHICH BLDG. IS DESIGNED _____
11. APPROXIMATE DATE OF COMMENCING WORK _____
12. APPROXIMATE DATE OF COMPLETION _____

I HEREBY GRANT PERMISSION FOR THE STURGIS TOWNSHIP ZONING ADMINISTRATOR AND/OR ASST. ZONING ADMINISTRATOR FOR BLDG. PERMITS ONLY TO ENTER THE ABOVE DESCRIBED PROPERTY FOR THE PURPOSES OF GATHERING INFORMATION RELATED TO THIS APPLICATION. I ALSO CERTIFY THAT I WILL ABIDE BY ALL REGULATIONS OF THE STURGIS TOWNSHIP ORDINANCE AND OTHER APPLICABLE LAWS AND REQUIREMENTS.

SIGNATURE

DATE