

FOREST HOME TOWNSHIP LAND USE APPLICATION #1 8/3/10

PO Box 317  
Bellaire, MI 49615

PROPERTY INFORMATION: Property Tax ID # 05-07 - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Property Address, if not established, attach a copy of the property description from tax statement.

Zoning District (Check X):  Ag  R-1  R-2  R-3  WC

Wetlands on Property?  Yes  No Steep Slopes?  Yes  No Within 500' of lake or stream?  Yes  No

Any permits already taken out?  Yes  No If yes, type & number or attach copy. \_\_\_\_\_

**PROJECT INFORMATION: Site plan drawn to scale must be provided. Show dimensions of lot, planned and existing buildings, and their location on the lot. Draw on a sheet 8 1/2" x 11" or larger.**

(Check X):  Use by Right  Special Approval/Date \_\_\_\_\_  Wetlands/Date \_\_\_\_\_  ZBA/Date \_\_\_\_\_

Lot Width \_\_\_\_\_ Lot Depth \_\_\_\_\_ Lot Area \_\_\_\_\_

Setbacks from property lines: Front \_\_\_\_\_ Rear \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_

Structures: Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_

(Check X):  New House  New Garage  Addition  Storage Bldg.  Deck  Other (describe)

Construction:  Wood Frame  Pole  Modular  Other (describe): \_\_\_\_\_

Foundation:  Full Basement  Partial Basement  Crawl  Slab  Pole  Portable

Existing Bedrooms \_\_\_\_\_ Planned Bedrooms \_\_\_\_\_ Existing Bathrooms \_\_\_\_\_ Planned Bathrooms \_\_\_\_\_

**Note: Minimum standard setback chart for all zones and fee schedule on reverse side.**

USE (Check):  One Family  Two Family  Multi. Family  Industrial  Commercial  Agricultural  Other (Desc)

**OWNER/S & CONTRACTOR INFORMATION:**

Owner/s: \_\_\_\_\_ Phone #1: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ Phone #2: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Street City State Zip

Contractor: \_\_\_\_\_ Phone #1: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_ Phone #2: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Street City State Zip or fax

Construction will agree with permit, plan, township zoning ordinance, and comply with local, state and federal laws. Owner and/or applicant agree to halt construction if conflict arises. Contact Zoning Administrator for staking inspection prior to construction. Permit expires in 12 months if work is not started.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_