



VILLAGE OF ELSIE PLANNING & ZONING DEPARTMENT

125 W Main St ▪ PO BOX 408 ▪ Elsie, MI 48831 ▪ PHONE: (989) 862 4273 Ext 7 ▪ www.elsie.org

Date Received	Zoning Permit Application Fee:	Payment Type:	Approved By:	Date Approved:
---------------	--------------------------------	---------------	--------------	----------------

▪ MAKE CHECK PAYABLE TO: **THE VILLAGE OF ELSIE** ▪ PERMIT FEE IS \$15.00 ▪

JOB LOCATION				
Address		Parcel ID # 16 - _____ - _____ - _____ - _____		Zoning District
Township	Section	Subdivision/Condo Name	Lot #:	Distance to nearest lake, stream, river or body of water:

APPLICANT INFORMATION			
<input type="checkbox"/> Property Owner	<input type="checkbox"/> Purchaser – Option or Purchase Agreement Date deed will be recorded with Register of Deeds ____/____/____	<input type="checkbox"/> Purchaser – Land Contract Please attach a copy of the land contract	
<input type="checkbox"/> Tenant	<input type="checkbox"/> Developer / Contractor	<input type="checkbox"/> Engineer / Architect	
Name/Company		Telephone	Cell
Address		City & State & Zip	Email

AFFIDAVIT

I agree the statements made in this application are true, and if found not to be true or incomplete, any zoning permit that may be issued may be void. I agree to comply with the conditions and regulations provided with any permit that may be issued. I agree the permit that may be issued is with the understanding all applicable sections of the Village of Elsie of proposed structure(s) are marked on the ground.

Applicant's Signature

Print Name

Date

OWNER INFORMATION		
Name	Telephone	Cell
Address	City, State & Zip	E-mail

AFFIDAVIT

I hereby certify that I am the owner of the above described property and that the information provided herein is true and correct. In lieu of representing this request myself as owner of the subject property, I hereby authorize the person designated above as applicant to represent this request on my behalf. I hereby give permission for Village of Elsie Planning & Zoning Department Staff to enter the property subject to this permit application for purposes of inspection.

Owner's Signature

Print Name

Date

EXISTING USE OF PROPERTY
Provide detailed list of all existing uses for this property (i.e. dwelling, residential storage, agriculture, home occupation, commercial storage, commercial, etc.). If more space is needed, please attach additional pages.

PROPOSED BUILDING INFO	
Number of Stories	
Overall Height:	
Overall Width:	
Overall Length:	

PERMIT REQUEST
Provide a detailed description of your request (proposed building and/or proposed use). If more space is required, please attach additional pages.

PROPOSED SETBACKS	
Front Setback:	
Rear Setback	
Side Setback:	
Side Setback:	

PROPOSED BUILDING DIMENSIONS

	DIMENSIONS OF PROPOSED STRUCTURE(S)	SQUARE FOOTAGE OF PROPOSED STRUCTURE(S)
1 st Floor:		
2 nd Floor:		
Garage/Storage Building (1 st floor):		
Garage/Storage Building (2 nd floor):		
Mobile Home (<i>Year of Mobile Home:</i> _____):		
Porch/Deck: <i>Covered:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
Porch/Deck: <i>Covered:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
Porch/Deck: <i>Covered:</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		
Other:_____		
Total Square Footage Of Proposed Structures:		

PLOT PLAN

Draw a plot plan below using a straight edge or a ruler. Please include items 1-10 (if applicable) on the plot plan.

- | | | |
|---|---|--|
| 1. Property shape & property line dimensions. | 4. Location of all drives & parking areas. | 7. The existing & intended use of the lot & structures. |
| 2. Place north arrow on plot plan. | 5. Rivers, lakes, wetlands, or streams within 500 ft. | 8. Parcels under separate ownership therein. |
| 3. Location, shape & size of all existing & proposed buildings on property. | 6. Front, rear, & side setback dimensions | 9. Road Right-Of-Way (ROW); access or utility easements. |
| | | 10. Other essential zoning information. |

Plot Plan - Sample

