STAMP RECEIVED

Application for Zoning Compliance
No Construction Proposed

Augusta Charter Township
8021 Talladay Road, P.O. Box 100
Whittaker, MI 48190
Phone 734-461-6117, Fax 734-461-6379
www.augustatownship.org

STAMP PAID

TOWNSHIP FILE	RELATED FILES
UC - _____ - _____	_____ - _____ - _____
_____ - _____ - _____	_____ - _____ - _____

PAYMENT INFORMATION

FEE: $55.00 Total Amount Paid: $_____

Paid via ☐ Cash ☐ Check # _____

Rec'd By _____ Receipt # _____

G/L # _____ - _____ - _____ - _____

GENERAL INFORMATION

Name(s) of Legal Property Owner(s) _____

Street Address (Street # & Name or P.O. Box) _____

City _____ State _____ Zip _____ Email _____

Phone _____ Fax _____ Cell _____

Name of Petitioner (if Different from Owner) _____

Company _____ Interest in Property: _____

Street Address (Street # & Name or P.O. Box) _____

City _____ State _____ Zip _____ Email _____

Phone _____ Fax _____ Cell _____

PROPOSED NEW USE INFORMATION

Address of Property: _____

Tax I.D. Number(s): _____

Existing Use of Property (use separate sheet if necessary): _____

_____

Current Zoning: _____ ☐ Proposed use is permitted in current zoning district.

Proposed Use of Property (use separate sheet if necessary): _____

_____

Name of Project: _____

Deed Restrictions applying to property: _____

_____

Additional Relevant Information: _____

_____

_____

SUBMISSION REQUIREMENTS

The following items must be submitted with this application:
Four copies of a Sketch Plan or Certified Survey of entire parcel, indicating

(A) the location and nature of all easements,
(B) the location of all existing and proposed buildings and/or structures
(C) distances to property lines

AFFIDAVIT

By submitting this application, authority is given to Township representatives to physically view and inspect the property.

The undersigned says that (s)he is the Petitioner involved in this Application, and that the foregoing answers and statements herein contained, and the information herewith submitted are, in all respects, true and correct to the best of his/her knowledge and belief.

Petitioner Signature _____ Date _____

If the Petitioner and Property Owner are *NOT* the same individual, the Property Owner, by signing below, says that they have given the Petitioner permission to submit this Application, and accepts that all obligations assumed by the Petitioner in the course of pursuing this Application will become those of the Property Owner should the Petitioner fail to satisfy them.

Property Owner Signature _____ Date _____

SUBMISSION

Date Rec'd. _____ by _____

☐ Application Form completed and signed by the Petitioner and/or Property Owner.

☐ Four copies of all plans and supplemental information provided

PAYMENT

Fee: $55.00 Amount Paid: _____

Paid via: ☐ Cash ☐ Check # _____

Rec'd By _____ Receipt # _____

G/L # _____-_____-_____-_____

FILING

For all new applications, a Township file number must be assigned and a new file must be created.

☐ Township File No.: UC - _____ - _____

☐ Related Township Files cross-referenced

☐ Application tracking spreadsheet updated

☐ Original application and one copy of all materials retained in Township File

☐ Four copies of all materials delivered to Zoning Administrator

ZONING ADMINISTRATOR ACTION

This application has been reviewed for compliance with the Township Zoning Ordinance and is hereby:

☐ Approved

☐ Requires site plan review by Planning Commission (Refer to Article 11 of the Zoning Ordinance.)

☐ Denied

_____ _____

Zoning Administrator Date

☐ Two copies returned to Applicant

☐ Copy of application forwarded to Assessor

If denied, the applicant can appeal to the Zoning Board of Appeals, as outlined in Section 15.7 of the Zoning Ordinance.

This permit will be void if proposed use of property is not commenced within 180 days.