

Wilber Township

3120 Sherman Rd

East Tawas, Michigan 48730

Telephone: (989) 362-5410

E-mail: wilbertownship@hughes.net Website: www.wilbertwp.com

ZONING PERMIT APPLICATION – RESIDENTIAL
(HOUSE, GARAGE ATTACHED OR UNATTACHED, ACCESSORY BUILDING, ADDITION,
DEMOLITION, DRIVEWAY, DECK/PORCH, SHED, FENCE, SWIMMING POOL)
Use Permitted by Right or Special Land Uses

This application is used for all residential plot plan applications except for fence and sign permits, which have their own application form. Applications will be processed within five **(5)** working days (schedule and workload permitting). The Zoning Ordinance is available on the Township's website www.wilbertwp.com

Fee Paid \$25.00 (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: _____

Action taken on _____ (date)

(Circle below as appropriate)

Approved
Plot Plan

Approved
Plot Plan with Conditions

Denied
Plot Plan

Zoning Administrator

Date

ZONING PERMIT APPLICATION – RESIDENTIAL

Requirements:

- Complete all application sections including Plot Plan Drawing.
- Signature in all designated locations.
- Owner’s signature when the applicant is not the owner, is required.
- Property staking completed.

Application Activity (Check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> New Home | <input type="checkbox"/> Deck/Porch |
| <input type="checkbox"/> Addition to: _____ | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Alteration/repair | <input type="checkbox"/> Fence: Type: _____ |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Swimming Pool |
| <input type="checkbox"/> Other: _____ | (shed, barn, gazebo, etc.) |

Additional Submittals (If Applicable)

- Sanitary sewer or septic approval
 - Either a copy of the approved septic permit from the District Health Department or a copy of the hook-up fee receipt to Township sewer service.
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- Water supply approval
 - Either a copy of the approved form to construct a well from the District Health Department or a copy of the hook-up fee receipt to Township water service.
 -
- A complete set of drawings and plans for proposed new construction.
- DEQ Permit (if applicable)
- For driveways a County Road Commission permit or MDOT for US 23

Application Information

Structure(s) must be of similar quality with principal dwelling (color, siding type, roof color, etc.)

Structure #1, consisting of _____

| | | |
|---------------------------------------|--|------------------|
| _____ feet from front lot line | _____ feet from left side lot line | _____ stories |
| _____ feet from rear lot line | _____ feet from right side of lot line | _____ roof pitch |
| _____ square feet of gross floor area | _____ feet in height | |
| _____ feet in length | _____ feet in width | |

Structure #2, consisting of _____

| | | |
|---------------------------------------|--|------------------|
| _____ feet from front lot line | _____ feet from left side lot line | _____ stories |
| _____ feet from rear lot line | _____ feet from right side of lot line | _____ roof pitch |
| _____ square feet of gross floor area | _____ feet in height | |
| _____ feet in length | _____ feet in width | |

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. Permits are valid for one (1) year from the date of issuance.

*I agree this permit is only for the work described, and does not grant permission for additional or related work which requires separate permits. I understand that this permit will expire, and become null and void if the work is not started within 180 days, or if work is suspended or abandoned for a period of 180 days at any time after work has commenced and that I am responsible for all required inspections.

Applicant signature(s)

Date

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

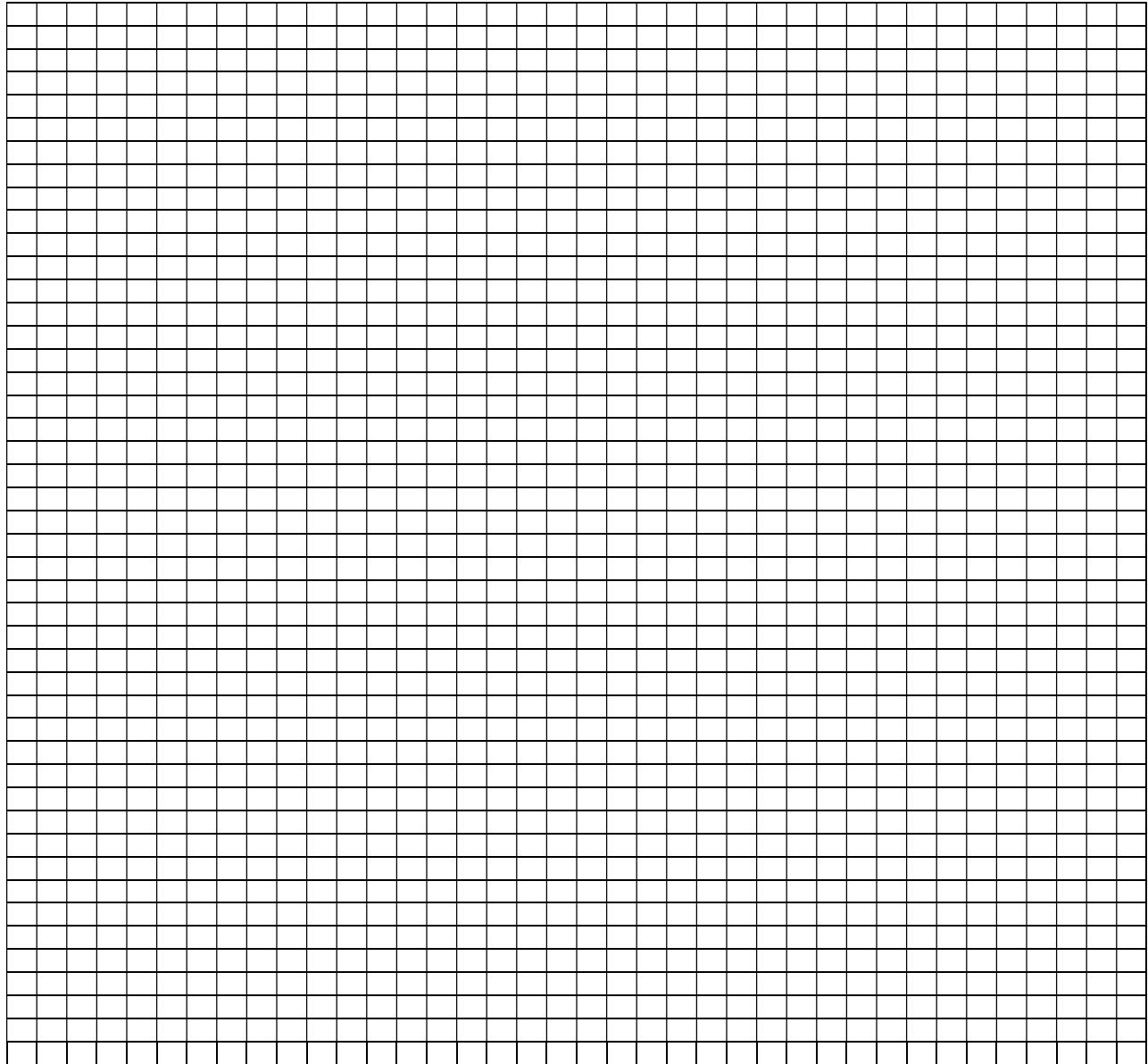
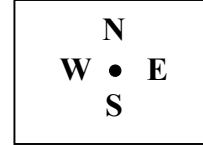
Date

RESIDENTIAL 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 including layout and elevations for new construction



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

Approved Zoning Administrator

Date