Date Issued_____

BRILEY TOWNSHIP
HOME OF MICHIGAN'S ELK CAPITAL

Permit No._____

Phone Number _____

Box 207, Atlanta, MI 49709 Telephone (989) 785-4050

APPLICATION FOR ZONING PERMIT & SITE EXAMINATION

Applicant's Name	Property Owner
Address	Address
City, State, Zip	City, State, Zip

Applicant: Complete this form and return with application fee to Briley Township Zoning Administrator. Make checks payable to Briley Township.

LOCATION OF PROPERTY	on_____ between _____ (cross street) and _____ (cross street) Subdivision _____ Lot No. _____ Block No. _____
EXISTING USE	_____ (Please explain: vacant land, single family residence, business, etc.)
TYPE OF IMPROVEMENT	❑ NEW BUILDING ❑ ADDITION ❑ RELOCATION ❑ REPAIR/REPLACEMENT ❑ ALTERATION ❑ OTHER
PROPOSED USE	_____ (Please explain: single family residence, garage, mobile home, etc.)

PLOT PLAN

1. Sketch shape and size of lot including a description of proposed or existing water and sewer facilities, with dimensions to lot lines.

2. Show size of existing and proposed buildings and the distances they are from each lot line.

3. Draw an arrow in this circle indicating which direction is north.

I hereby give the Zoning Administrator or his representatives permission to enter upon the above said property for the purposes of doing the necessary inspection for this permit.

_____ Date of Application

_____ Signature of Applicant

TO BE COMPLETED BY ZONING ADMINISTRATOR

DISPOSITION

ZONING DISTRICT_____ PROPERTY NUMBER _____

SITE PLAN REVIEWED AND/OR INSPECTED ON _____

APPLICATION: ❑ APPROVED ❑ DENIED REASON FOR DENIAL: SEE REMARKS

APPLICATION FEE PAID _____ ❑ CASH ❑ CHECK# _____

REMARKS _____

_____ ZONING ADMINISTRATOR

FORM #11/91 **WHITE:** ZONING ADM. COPY **YELLOW:** APPLICANT'S COPY **PINK:** TOWNSHIP COPY **GOLD:** TOWNSHIP COPY