



APPLICATION – ZONING COMPLIANCE

Planning Department • 1401 W. Herbison Road • DeWitt, MI 48820
Phone: 517/669-6576 • Fax: 517/669-6496

PLANNING DEPARTMENT USE ONLY

Final Action:

- Approved
- Approved w/conditions (see attached)
- Denied
- Need more information (see attached)

Comments: _____

Application Received: _____

Case #: _____

Tax ID: _____

Fee: _____

Receipt #: _____

Reviewer: _____ Date: _____

I. APPLICANT INFORMATION

Applicant Name _____

Address _____

Telephone Number _____ Interest in Property (owner, tenant, option, etc.) _____

Contact Person _____ Telephone Number _____

Email: _____

Note: If applicant is anyone other than owner, request must be accompanied by a signed authorization from the owner. I, property owner, consent to allow the applicant to move forward with their proposal as described on this document.

Printed Name _____ Date _____

Signature _____

II. PROPERTY INFORMATION

Owner _____ Telephone Number _____

Property Address _____

Zoning District: _____

III. REQUEST DESCRIPTION (Attach additional sheets, if necessary)

State the Use(s) Being Applied For _____

Fence Type: _____ Height: _____

Total No. of Employees: _____ Shifts: _____ No. of Employees in Peak Shift: _____

Total Size of the Building: _____ square feet

For buildings with multiple uses (such as office and retail), indicate the amount of area to be devoted to each use (attach or draw a sketch):

Use #1: _____ Area: _____ square feet

Use #2: _____ Area: _____ square feet

Use #3: _____ Area: _____ square feet

Site Plan Sketch

