

Locke Township

Ingham County, Michigan

3805 Bell Oak Road, Williamston, MI, 48895 (517) 468-3405 Fax (517) 468-0105

LAND USE PERMIT APPLICATION for a DWELLING and related accessory uses/structures.

References to "Section" and "Article" refer to the Locke Township Zoning Ordinance They are provided to assist the applicant. The references highlight parts of the Ordinance that may be applicable but do not necessarily identify all parts that apply.

Important Notice to Applicants: This application must be completed in full and 5 copies submitted to the Zoning Administrator (see #13). All questions must be answered completely. If additional space is needed, number and attach additional sheets. Approval of this application is required before a Land Use Permit can be issued. The erection of a building or structure, or excavation for any building or structure, prior to the issuance of a Land Use Permit, is a violation of the Zoning Ordinance.

1) APPLICANT:

Name	Street Address	City / State / Zip Code	Telephone #
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2) Applicant's Interest in Property: Owner Lessee Buy Option Other/Specify:

3) Property Address: _____ between _____ and _____ Roads

4) Landowner: Name, address & phone number of landowner if different than "Applicant":

12) This application is made for a:

(check all as appropriate)

5) Tax Parcel #:

6) Zoning District:

7) Parcel Acreage:

8) Present Use:

9) Is parcel in a: platted subd. condo. subd.
If "yes", subd. name:

10) Deed restrictions on parcel: Yes No
If "yes", attach.

11) Names, addresses, phone #s of all other persons or entities having legal or equitable interest in the land:

a)

b)

	New	Addition or Alteration
Single Family Dwelling (Sec. 28.10)	<input type="checkbox"/>	<input type="checkbox"/>
Two-Family Dwelling	<input type="checkbox"/>	<input type="checkbox"/>
Temporary Dwelling (Sec. 28.12)	<input type="checkbox"/>	<input type="checkbox"/>
Accessory Bldg./Garage (Sec. 28.11)	<input type="checkbox"/>	<input type="checkbox"/>
Accessory Bldg./Pole Barn (Sec. 28.11)	<input type="checkbox"/>	<input type="checkbox"/>
Accessory Bldg./Pool (Sec. 28.20)	<input type="checkbox"/>	<input type="checkbox"/>
Other/Specify:	<input type="checkbox"/>	<input type="checkbox"/>

13) Supporting Documents:

Plot Plan: Submit at least five copies of both this completed form and a Plot Plan prepared according to Sec. 3.04(B).

Proof of Property Ownership: Attach proof of ownership of the property such as a warranty deed, land contract or other evidence of interest in the property

Deed Restrictions: Attach a copy of all deed restrictions applicable to the subject property.

14) AFFIDAVIT: I (we) the undersigned affirm that the foregoing answers, statements, and information, and any attachments, are in all respects true and correct to the best of my (our) knowledge and belief. I (we) the undersigned understand that the Land Use Permit applied for, if granted, is issued on the representations made herein and that any Land Use Permit or Building 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 requirements.

Applicant Signature(s) Date

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

Date

FOR TOWNSHIP USE ONLY

Application Number:	Tax Parcel Number:												
Date Received:	Zoning Administrator Action Taken (circle as appropriate)												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Fee Paid</td> <td style="width: 33%;">Date</td> <td style="width: 33%;">Receipt #</td> </tr> <tr> <td>1)</td> <td></td> <td></td> </tr> <tr> <td>2)</td> <td></td> <td></td> </tr> </table>	Fee Paid	Date	Receipt #	1)			2)			<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;">Approved</td> <td style="width: 33%; text-align: center;">Approved with Conditions</td> <td style="width: 33%; text-align: center;">Denied</td> </tr> </table>	Approved	Approved with Conditions	Denied
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Notes:													
on the following date: _____													