APPLICATION FOR ZONING COMPLIANCE PERMIT

PLEASE PRINT OR TYPE (if additional space is needed, use an additional sheet.)

The application must be accompanied by one (1) copy of a scaled plot plan such information as may be necessary to establish that the proposed use, structure, or addition is in full compliance with all provisions of this Ordinance. This application **MUST** be signed and approved by the Zoning Administrator ***before*** the applicant may apply for construction permits with the County.

Applicant Information		
Name:		
Address:	City:	Zip Code:
Telephone:	Email:	
Interest in Subject Property:		

Owner(s) Information:	*(if different from applicant, include owner-signed consent to, and certification of, application)*	
Name:		
Address:	City:	Zip Code:
Telephone:	Email:	
Interest in Subject Property:		

Project and Property Information:		
Nature of Project:	☐ use of land and/or structures	☐ construct new building(s)
	☐ add to existing building(s)	☐ alter existing building(s)
For the following use(s):		
Property Identification Number:		
Subject Property Address:		
Project Description:		

Applicant(s) Certification:	
Applicant(s) acknowledges that the information submitted in and with this application is true and correct to the best of his/her knowledge.	
Applicant Signature(s):	Date:
Owner's Signature (if different from applicant):	Date:

Submission Requirement Checklist:

- ☐ Proposed location and dimensions of buildings, additions, and other structures in relation to the property lines and any other structures
- ☐ Property address
- ☐ Property Dimensions
- ☐ Existing public rights-of-way
- ☐ Private and Public Easements
- ☐ Water bodies, wetlands, and water courses (if applicable)
- ☐ Location and dimensions of drives and parking areas ☐ Proposed grading and site drainage patterns
- ☐ Sanitary and well locations.
- ☐ Application Fee, made payable to ChocolayTownship

FOR TOWNSHIP USE ONLY			
Fee Received: $	Date:	By:	
Zoning Compliance Permit			
☐ Approved		☐ Approved with conditions	
☐ Denied			☐ Construction Permits Required
			☐ Other Permits Required
Comments:			
Zoning Administrator: _____ Signature			Date:

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