

Sugar Island Township • 6401 E. 1½ Mile Rd. • Sault Ste. Marie, MI 49783

APPLICATION FOR ZONING COMPLIANCE PERMIT

The following PERMITS are required for various building projects (additions, new building, etc.) at least two (2) are required for any project:

Zoning Administrator (Burt Menard)	906/635-5105	Chippewa Co. Health Dept. (Well & Septic).....	906/635-6362
Chippewa Co. Road Comm.	906/635-5295	Dept. of Envr. Quality (Wetlands/Waterfront)	800/662-9278
Chippewa Co. Building Dept.....	906/635-6362	U.S. Corps of Engineers (Docks/Dredging).....	906/632-3311
Dept. of Soil Conservation/Erosion	906/635-6362	Electric Permit (Lon Kologe).....	906/484-2053
Mechanical Permit (Ken Nightlinger)	906/484-2167	Plumbing Permit (Dave Yeager).....	906/484-3055

A PLOT PLAN, DRAWN TO SCALE, SHOWING EXISTING & PROPOSED BUILDINGS AND STRUCTURES FOR SAID PROPERTY MUST BE SUBMITTED WITH THIS APPLICATION ON ATTACHED SHEET.

Application is made for: (check one) (Print) Owner's Name: _____
[] Dwelling Local Address: _____
[] Non-Dwelling (garage, pole bldg.) Telephone: _____
[] Altering Existing Buildings/Add-Ons Home Address: _____
[] Land Use Telephone: _____

Structure Type, Size, & Square Footage: _____
Property Address: _____
Property Tax I.D. Number: _____
Building Height: _____
Lot Area (Length & Width): _____ Floor Area (Sq. Ft.): _____
Waterfront or N. Setback: _____ Number of Bedrooms: _____
Waterfront or E. Setback: _____ Min. Dist. Between Bldgs. (10' min): _____
Waterfront of W. Setback: _____
Waterfront or S. Setback: _____

The Applicant is: (check one)
_____ Owner _____ Acting on behalf of the owner

I, _____, do hereby swear that the above information is correct and true to the best of my knowledge and that zoning inspectors have my permission to conduct on-site inspections as deemed necessary. Any misrepresentations or incorrect data will void this application, even if approved, if found to be so at a later date.

Owner's Signature: _____ Contractor's Signature: _____
Contractor's Name (print): _____
Contractor's License#: _____

Zoning Inspector: _____ Date: _____ Fee Rec'd: _____

Zoning Compliance Permit for use of the above property is hereby:
[] **Granted - Permit valid for 2 years from date of issuance.**
[] **Denied, reason being:** _____

Note: Original to Township, Copy to Customer. USE ATTACHED FOR PLOT/SITE PLAN.

SITE PLAN

