

NORTHFIELD TOWNSHIP MICHIGAN

8350 Main Street • Whitmore Lake, Michigan 48189-0576

Telephone: (734) 449-2880 • Building Dept. (734) 449-5000 • Fax: (734) 449-0123 • Web Site: www.twp-northfield.org

ZONING COMPLIANCE APPLICATION / CERTIFICATION

Zoning Compliance is required prior to new construction, alterations to an existing structure, or change of use.

This application must be accompanied by two (2) copies of scaled site plans meeting the information requirements of the Zoning administrator. Plans must be dated (mo., day, yr.), including revisions, notate scale, and include a directional 'North' arrow.

Proposed and existing structures must be included in plans. For non-residential uses in any zoning district, all buildings and structures, utilities, parking area, dumpsters, landscaping, sidewalks, paved drives, fences, sign locations, etc. must be clearly visible on plans.

Site plans must also list the name, address, and parcel number of the property being reviewed on the Zoning Application.

Applications for zoning compliance certificates shall be deemed abandoned (6) months after the date of filing unless diligently pursued or a building permit or certificate of occupancy is issued. Any certificate shall become invalid if the authorized work is suspended or abandoned for a period of six (6) months after commencement of work.

PROJECT NAME:	
PROJECT ADDRESS:	
PARCEL ID(S):	IS THIS PROPERTY IN A FLOOD PLAIN: <input type="checkbox"/> Yes <input type="checkbox"/> No
Applicant Information:	Proprietor/Owner Information:
Name:	Name:
Address:	Address:
Phone:	Phone:
Email:	Email:
If application is made by anyone other than the owner in fee, it shall be accompanied by a duly verified affidavit of the owner or agent thereof that the application and the proposed work or operation is authorized by the owner in fee. If the owner or lessee is a corporate body, the full name and address of the responsible officers shall also be provided.	
Proof of Ownership Attached: <input type="checkbox"/>	Non-Owner Affidavit Attached: <input type="checkbox"/>
If applicant is not the owner, describe applicants interest in the property: _____	
PROPERTY DESCRIPTION	
Description of Proposed Use: _____	
Sanitary Facilities: <input type="checkbox"/> Sewer; Sewer Tap Permit #: _____ <input type="checkbox"/> Septic; WCHD Permit #: _____	
Zoning Classification(s): AR LR MR MHP SR1 SR2 LC HC GC LI GI RTM ES PUD PSC RC RO WLD-___ W.L./N.T. Overlay OTHER: _____	
Type of Construction/Alteration: _____	
Project Start Date:	Project Completion Date:
AUTHORIZED SIGNATURE	
In the case of a false statement or misrepresentation of fact in the application or on the plans on which the certificate is based, any zoning compliance certificate issued thereto shall be null and void. I hereby acknowledge the above facts and those on the attached site sketch and prints to be true to the best of my knowledge and state that said construction and/or occupancy of the structure and/or site shall occur in accordance with this certificate. Further, I agree to give permission for officials of Northfield Township, Washtenaw County and the State of Michigan to enter the property for the purposes of inspection.	
Applicant(s) Signature _____	Date _____

