



Village of Bellaire
202 N. Bridge St.
P.O. Box 557
Bellaire, MI 49615

Phone: (231) 533-8213

Fax: (231) 533-4183

LAND USE ZONING PERMIT APPLICATION

Office Use Only:	Fee Received: _____
Case #: _____	Check Number: _____
Date Received: _____	Approved: _____ Permit #: _____
Date of Inspection: _____	Denied: _____ Section: _____

APPLICANT: _____ **CAPACITY** _____
(Must provide designated agent form if not property owner)

MAILING ADDRESS: _____

TELEPHONE (HOME): _____ **TELEPHONE (BUSINESS):** _____

PROPERTY OWNER'S NAME AND ADDRESS (if not the applicant):

PROPOSED CONSTRUCTION SITE ADDRESS: _____

PARCEL SIZE: _____ **NEAREST INTERSECTION:** _____

STREET FROM WHICH DRIVEWAY WILL ACCESS: _____

PARCEL DATA PROCESS (tax) NUMBER: _____

PROPOSED USE:

- | | |
|---------------------------------|-----------------------|
| _____ Single Family Home | _____ Two Family Home |
| _____ Multi-Family Home | _____ Temporary Shed |
| _____ Garage or Accessory Bldg. | _____ Addition |
| _____ Other (describe) _____ | |

Exterior Dimensions of Proposed Structure: _____

Height of Structure and # of stories: _____

Square Footage of Structure: _____

Builder's Name: _____

Builder Address and Job Phone Number _____

ATTACH PLANS, TO-SCALE DRAWINGS, SPECIFICATIONS FOR THE PROPOSED LAND USE AND BUILDINGS. (Site plan requirements are specified in Article X, Section 10.2 A of the Village of Bellaire Zoning Ordinance.)

For R1 (Residential District): INCLUDE

- _____ Lot or parcel dimensions
- _____ Existing building & dimensions, including eaves
- _____ Proposed building & dimensions, including eaves
- _____ Front, side, & rear yard dimensions
- _____ Name of road, waterfront, easements, or other right of way
- _____ Scale, north arrow, etc.
- _____ Natural features on site
- _____ Required setbacks of property
- _____ Exterior lighting if being proposed

ATTACH EVIDENCE OF PROPERTY

LIST ANY ADJACENT PARCELS UNDER THE SAME OWNERSHIP: _____

AFFIDAVIT:

I agree the statements made above are true, and if found not to be true, any zoning permit that may be issued may be void. Further, I agree to comply with the conditions and regulations provided with any permit that may be issued. Further, I agree the permit that may be issued is with the understanding all applicable sections of the Village of Bellaire Zoning Ordinance will be complied with. Further, I agree to notify the Zoning Administrator of the Village of Bellaire for inspection before the start of construction and when locations of proposed uses are marked on the ground. Further, I agree to give permission for officials of the Village of Bellaire, Antrim County, and the State of Michigan to enter the property subject to this permit application for purposes of inspection. Further, I hereby certify that the property owner authorizes the proposed work, and that I have been empowered by the owner to make this application as his/her selected agent. Finally, I understand this is a zoning permit application (not a permit) and that a land use permit, if issued, conveys only land use rights, and does not include any representation or conveyance of rights in any other statute, building code, deed restriction or other property rights.

Signed: _____ Date: _____

NOTE: Property lines & locations of proposed uses must be marked on the ground before a permit will be issued. Applicant must notify the Zoning Administrator when the property is marked and ready for inspection.

When completed, send to:
 Zoning Administrator
 Village of Bellaire
 PO Box 557
 Bellaire, MI 49615

VERIFIED: (Office use only)			
Compliant			STANDARDS
Yes	No	N/A	
			Setbacks are in compliance
			Exterior lighting
			Proposed drive identified
			Natural Features identified and addressed
			Addressed right of ways and easements if applicable
			location of proposed structures and uses
			Modifications expected for any regulatory agency