

Date:	
Application Number:	
Review Fee: \$	

## FOREST TOWNSHIP ZONING PERMIT APPLICATION

□ Single Family Residence (new) □ Accessory Structure □ Alterations or repairs to non-conforming structures □ Other □ Attach a scaled plot plan: Drawings may be 8 ½" x 11" paper. Show the following:  1. The dimensions of the parcel. 2. All streets. 3. The size, position and height of all existing and proposed buildings or structures on the property inclutheir setback from lot lines.  I hereby affirm that the above information is correct to the best of my knowledge.	Applicant Information				
City: Zip: Home Ph: Day Ph:	Name:				
Property Owner (if different from applicant; if more than 1 list on separate sheet)  Name:  Street Address:  City:  Zip: Home Ph: Day Ph:  Property for which Zoning Permit is requested  Street Address:  Nearest Crossroads:  Tax Parcel ID#:  Zoning District:  Proposed Use    Single Family Residence (new)   Single Family Residence (addition)   Accessory Structure   Alterations or repairs to non-conforming structures   Other  Attach a scaled plot plan: Drawings may be 8 ½" x 11" paper. Show the following:  1. The dimensions of the parcel.  2. All streets.  3. The size, position and height of all existing and proposed buildings or structures on the property inclu their setback from lot lines.  I hereby affirm that the above information is correct to the best of my knowledge.  Signature of Applicant  Print/type name  Date    Date	Street Address:	7:	II. BI		
Name:   Street Address:	City:	ZIP:	Home Pn:	Day Pr	1:
Street Address:    City:	Name:				
Property for which Zoning Permit is requested	Street Address:				
Property for which Zoning Permit is requested	City:	Zip:	Home Ph:	Day Ph	n:
Tax Parcel ID#: Zoning District:	Property for which Zon Street Address:	ning Permit is re	quested		
Proposed Use   Single Family Residence (new)   Single Family Residence (addition)   Accessory Structure   Fence   Move existing building   Move	riodi oot orodoroddo.				
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Signature of Applicant  Print/type name  Date  Signature of Property Owner (if different from applicant)  FOR OFFICE USE ONLY  Zoning Administrator's Determination (provide date of decision): Approved	<ol> <li>The dimensions of th</li> <li>All streets.</li> <li>The size, position ar their setback from lo</li> </ol>	ne parcel. nd height of all ex t lines.	kisting and proposed b	ouildings or structures	
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(See reverse)  FOR OFFICE USE ONLY  Zoning Administrator's Determination (provide date of decision): Approved Date Date			,,		
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(See reverse)  FOR OFFICE USE ONLY  Zoning Administrator's Determination (provide date of decision): Approved Denied Date			Print/type name		Date
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