MICHIGAMME TOWNSHIP
PO Box 220, 202 W. Main Street, Michigamme, MI 49861
Phone: 906-323-6608 **Fax:** 906-323-6344
Email: recep@michigammetownship.gov **Website:** www.michigammetownship.com

ZONING COMPLIANCE PERMIT

Owner: _____

Address: _____

City, State & Zip: _____

Phone: _____ Email Address: _____

Street Address of Property: _____

Property Parcel ID: _____

Proposed Use: _____

Please read the following instructions:

1. Use attached sheet for site plan and draw to scale.
2. Indicate all existing and proposed buildings. Label proposed building.
3. Identify use of each building.
4. Label building dimensions including height and lot dimensions.
5. Label distances to lot lines, water bodies and other structures.
6. Indicate all roads and easements.
7. Indicate natural features affecting development, i.e. rocks and water.
8. Indicate parking spaces, signage (size & location) and any other applicable man-made features.
9. Draw an arrow indicating "North"
10. A 25.00 Fee is required with permit application. Make checks payable to Michigamme Township.

This document is legally binding. By signing it the owner agrees to proceed according to the specifications provided. All zoning regulations (including land and waterfront) are available through the Township office and found on the Township website.

Owners Signature: _____ Date: _____

For Zoning Administrator Use:

Existing Use: _____

Proposed Use: _____

Zoning District: _____ Approved: ☐ Disapproved: ☐

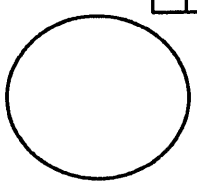
Remarks: _____

_____

_____

Zoning Administrator or Planning Commission Chairperson signature _____ **Date:** _____

Effective 10-10-2021



DRAW ARROW IN CIRCLE
INDICATING NORTH