

SHED INSTALLATION CHECKLIST

PERMIT APPLICATION CHECKLIST

(Return with **Zoning Permit** Application)

(If applicable, shed greater than 200sq ft in size, Return with **Accessory Building Permit** Application)

Permit application for: _____
(Job Address)

Owner's Name: _____

Contractor's Name: _____

Before any zoning approval may be granted, all of the following documentation must be submitted with an application to place the fence. By providing all information, you can assure that the application can be reviewed as efficiently as possible.

- _____ 1. **BUILDING PERMIT APPLICATION** (accessory, if applicable) including the following:
 - A. length, height & width to be installed.
 - B. signature of applicant (owner or contractor).
- _____ 2. **LOT DIAGRAM** or **PLOT PLAN** on page two of application form. The drawing must include all items listed on the form, and must show where the fence is to be placed on the owners property, and its relationship to buildings and lot lines.
- _____ 3. **TYPE:** Indicate type of shed to be placed (i.e. chain link, picket, privacy, stockade, etc.)
- _____ 4. **PROOF OF OWNERSHIP** (Provide a copy of one of the following documents: tax statement, assessment notice, deed, title insurance commitment.)
- _____ 5. **PROPERTY TAX I.D. NUMBER FOR PROPERTY INVOLVED.**

Your application will be reviewed when all information has been received, and a permit issued when compliance with applicable ordinance requirements has been verified. Placement of the fence should not proceed until you have first received the zoning approval permit.

BUILDING DEPARTMENT OFFICE HOURS are 1:00pm to 5:00pm, Monday through Friday and All Day Wednesday. TELEPHONE at 517-641-4238; by MAIL at 14480 Webster Rd, PO Box 247, Bath, MI 48808; or by FAX at 517-641-4170.

Signed: _____ Date: _____

PLEASE CALL SHOULD YOU REQUIRE FURTHER ASSISTANCE IN COMPLETING APPLICATIONS.



Zoning (Land Use) Permit Application

Planning and Zoning Department
14480 Webster Road, P.O. Box 247, Bath, MI 48808
Phone (517) 641-5166 Fax: (517) 641-4170
www.bathtownship.us

Property Owner: _____ Phone: _____ Cell: _____

Address: _____ Email: _____

Project Address: _____

Parcel ID Number: 19-010- _____ Zoning District: _____

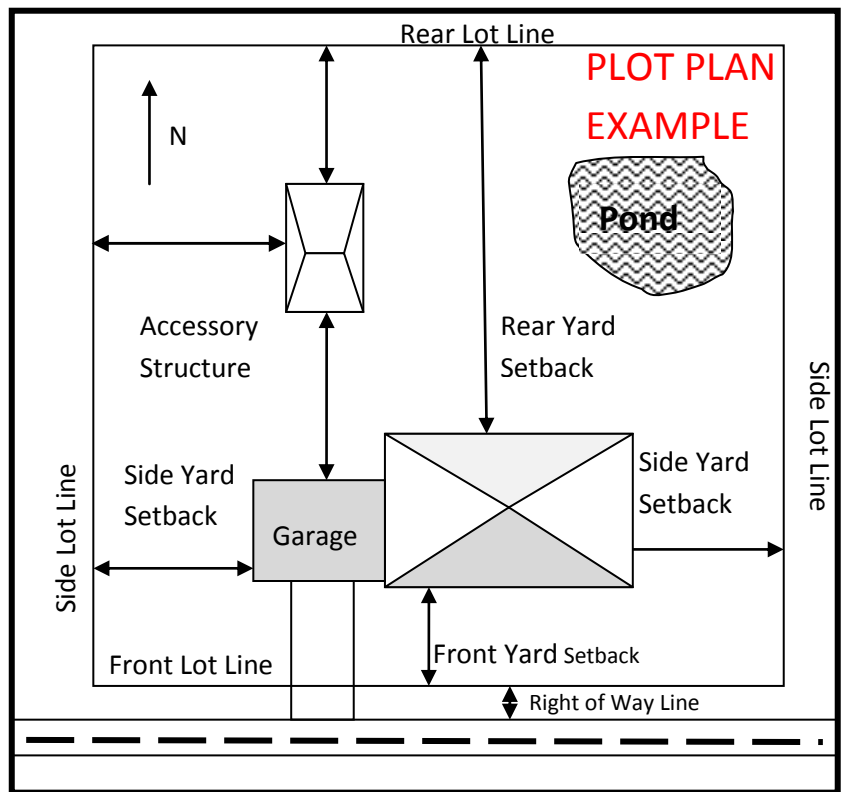
Site is N S E W, of intersection: _____ Subdivision: _____

Intended Use of Land / Structure: _____

A PLOT PLAN SHALL ACCOMPANY THIS APPLICATION

Plot Plan shall show all of the following:

1. Lot Dimensions in feet
2. Label adjacent roads (public and private)
3. Location and sizes of all existing and proposed structures
4. Front, rear and side yard distances from structures to lot lines (front yard is measured from road right of way line)
5. Distance between structures
6. Driveways (distance from lot line)
7. Any lakes, ponds, waterways or wetlands within 500 feet.
8. Utility Lines
9. Easements (existing and proposed)
10. North Indicator



THE OWNER OF THIS LAND AND UNDERSIGNED, DO HEREBY COVENANT AND AGREE TO COMPLY WITH ALL APPLICABLE LAWS AND THE ZONING ORDINANCE OF BATH CHARTER TOWNSHIP PERTAINING TO LAND USE, AND TO CONSTRUCT THE PROPOSED STRUCTURE OR MAKE THE PROPOSED CHANGE OR ALTERATION IN ACCORDANCE WITH THE PLANS AND SPECIFICATIONS SUBMITTED HERewith, AND CERTIFY THAT THE INFORMATION AND STATEMENTS GIVEN ON THIS APPLICATION ARE TO THE BEST OF THEIR KNOWLEDGE, TRUE AND CORRECT. BY SIGNING THIS DOCUMENT YOU ALSO AGREE TO COOPERATE WITH THE ZONING AND BUILDING STAFF, AND ALLOW ACCESS TO ALL PROPERTIES AND STRUCTURES MENTIONED ABOVE.

ZONING FEE: \$50



Zoning (Land Use) Permit Application

Planning and Zoning Department

PLOT PLAN DIAGRAM

See first page for plot plan example

Applicant / Agent Signature: _____ Date: _____

Agents Address: _____ Email: _____

Phone: _____ Cell: _____

Officials Approval: _____ Date: _____

ZONING FEE: \$50

ACCESSORY BUILDING PERMIT

Date ____/____/____
BATH TOWNSHIP

Permit # _____
Accessory/detached structures and demolition

Bath Township Building and Zoning
 PO Box 247, (14480 Webster Rd)
 Bath, MI 48808
 Phone: 517-641-4238
 Fax: 517-641-4170

Job Address: _____ Property Tax Id No. _____

Owner _____ Phone: () _____ Cell: () _____

Address: _____ E-mail address _____

Basic Dimensions: _____ ft x _____ ft. No. of floors _____ Building Height _____

Type of Construction _____

PLEASE FILL IN OR CHECK THE APPROPRIATE SPACES BELOW:

- | | |
|--|---|
| <input type="checkbox"/> Sq. ft. shed | <input type="checkbox"/> cement slab & thickened edge |
| <input type="checkbox"/> Sq. ft. pole building | <input type="checkbox"/> cement slab (3 1/2" - 4") |
| <input type="checkbox"/> Sq. ft. porch on pole building | <input type="checkbox"/> rafters _____" O.C. |
| <input type="checkbox"/> Sq. ft. pool | <input type="checkbox"/> trusses _____" O.C. |
| <input type="checkbox"/> Sq. ft. deck for pool | <input type="checkbox"/> metal roof |
| <input type="checkbox"/> Sq. ft. unattached frame garage | <input type="checkbox"/> asphalt shingles |
| <input type="checkbox"/> Sq. ft. storage building & foundation | <input type="checkbox"/> metal exterior |
| <input type="checkbox"/> Sq. ft. demolition | <input type="checkbox"/> aluminum/vinyl exterior |
| <input type="checkbox"/> Lineal ft. fence | <input type="checkbox"/> brick exterior |
| _____ Type of fence | <input type="checkbox"/> block exterior |
| _____ Height of fence | <input type="checkbox"/> wood exterior |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Number of windows _____ |
| | <input type="checkbox"/> Number of garage doors _____ |

Office Use Only

Zoning District _____
 Use Group _____
 Type of Construction _____
 Permit Determinant _____

COST OF PERMIT: \$ _____

By: _____
Building Official

Make checks payable to: **BATH Township**

Contractor		Phone	Fax
Fax		Cell	
Address		City & State	Zip Code
Federal D No/Social Security No.		MESC Employer No.	
License No.	Expiration Date	Worker's Disability Compensation Carrier	
EMAIL			
If exempt from any of the above, explain here:			

Section 23A of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of Section 23A are subject to civil fines.

HOMEOWNER'S AFFIDAVIT and SIGNATURE

I hereby certify that the work described above shall be installed in accordance with the local code and shall not be enclosed, covered up, or put into operation until it has been inspected and approved by the inspector. I will cooperate with the inspector and assume the responsibility to arrange for necessary and timely inspections.

Signed: _____ Date: _____

AGENT'S/CONTRACTORS AFFIDAVIT and SIGNATURE

I hereby certify that the proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorized agent.

Signed: _____ Date: _____

COMPLETE INFORMATION ON SECOND PAGE