

Marcellus Township Zoning Permit Application

Bldg Permit # _____ Zoning Permit # _____

Please print clearly below this line:

Parcel Number(s): _____

Plat/Condo Name: _____ Lot Number/Unit: _____

Applicants Information:

Name

Street Address

City **State** **Zip**

Home / Cell

Business Phone

Email Address

Property Owners Name & Address:

(if not same as applicant)

Name

Street Address

City **State** **Zip**

Home / Cell

Business Phone

Email Address

A detailed site plan must be submitted with this application:

And shall indicate the following:

1. Location of proposed building(s), building dimensions and set backs from parcel lines.
2. All measurements must be scaled to (NOT LESS THAN 1" = 200FT NOR GREATER THAT 1" = 20FT)
3. Locations of road(s) or easements of record and the direction of North.
4. Location of any body of water (i.e. lake, river, stream, creek, wetland, county drains, etc.)

PROPOSED TYPE OF BUILDING OR USE (Check one)

Residential _____ Multi-Family Residential _____ Commercial _____ Industrial _____ Other _____

Other Use/Explanation _____

Structure Dimensions: Total Sq. Ft _____ Width _____ Ft and Length _____ Ft _____

Additional Description of Construction _____

Accessory Building/Addition Description _____

Type of Construction (check all that apply) New Construction _____ Remodel _____ Replacement _____

Stick Built _____ Manufactured _____

Applicants capacity if not the Property Owner

Builder _____ Have option to purchase _____ Agent/Other _____

Owner/Applicant(s) Signature Date

Building Permit # _____ Zoning Permit # _____ (year/no.)

OFFICE USE ONLY

Zoning District: _____ Acreage: _____ Non-conforming lot: Yes _____ No _____

Minimum Required Front Yard Setback: _____ Minimum Required Side Yard Setback: _____

Minimum Required Rear Yard Setback: _____ Other: _____

Variance Granted: YES _____ NO _____ Special Land Use Granted: YES _____ NO _____

Approved: YES _____ NO _____ WITH CONDITIONS _____

DENIED: _____ Not in compliance with the following provisions of Marcellus Township Zoning Ordinance

Article Number: _____

Section Number: _____

Additional Information: _____

Signature of Zoning Administrator: _____ **Date:** _____