

Permit # _____

Owner _____ Parcel Number 54-01-_____-_____-_____

City _____ State _____ ZIP _____

Phone _____ email: _____

Contractor _____ Company _____

Address _____ email: _____

City _____ State _____ ZIP _____

Proposed use _____ Building On: ☐ New Site ☐ Existing Site

Location: On _____ road, _____ (mile) **N S E W** of _____ on the **N S E W** side.
(Your Road) (How far?) (cross road)

1. All lot lines
2. Existing roads and right-of-way
3. Buildings (existing & proposed)
4. Septic System & Wells
5. Bodies of water
6. Natural features

For Office Use: Use Type: _____

Zoning District: _____

Setback: _____

Front **Side** **Rear**

*Setbacks are measured from the road right-of-way, not edge of road.

Mecosta County Health Dept.

____ APPROVE _____ EXEMPT

Mecosta County Road Comm.

APPROVE _____ DENY _____

Mecosta County Drain Comm.

____ APPROVE _____ EXEMPT

[illegible]

I hereby certify that the information contained on this application is correct and that all uses for which this application is made conform to the Green Charter Township Zoning Ordinance. I further certify this permit is subject to the terms and conditions of the Zoning Ordinance and violation of these terms will be sufficient evidence for the revocation of this Clearance. With this permit I grant permission for Green Charter Township Zoning, Building and Assessing officials or employees to enter the property for inspections.

Applicant Signature _____ Date _____

Comments _____

APPROVED EXEMPT Signature _____ Date _____