

6/27/25

BENONA TOWNSHIP ZONING PERMIT APPLICATION
(Approved Application is the Zoning Permit)

OWNER: _____
MAILING ADDRESS: _____
TELEPHONE NUMBER: _____
E-MAIL ADDRESS: _____
CONTRACTOR INFORMATION: _____

OFFICE USE ONLY	
Date Rec'd:	_____
Zoning District:	_____
ZONING PERMIT #:	_____
COPIES: ASSESSOR - OWNER	

PARCEL NUMBER: _____ **PROPERTY ADDRESS:** _____

PROPOSED PROJECT: _____

SIZE (Square Feet)			
UF Basement		Finished Basement	
1st Floor		2nd Floor	
Porch		Deck	
Garage		Pole Barn	
		Other	

SETBACKS FROM PROPERTY LINES:

FRONT		LEFT SIDE	
REAR		RIGHT SIDE	
OTHER		HEIGHT	

STATE OF MICHIGAN PERMIT _____ *(if applicable)*

SITE PLAN MUST BE ATTACHED, and show the following: Dimensions of lot, road or street locations, existing buildings and size, proposed buildings (s), and size, distance from property lines (front, rear, and sides), parking spaces (if applicable).

- New Builds or Additions: Set of plans showing Floorplan, floors/story height, views, side & front, type of foundation or basement. Plan blueprint / or layout by the owner is acceptable.
- Owner(s) certifies that all information provided is correct and will abide by all rules, regulations, zoning ordinances of State, County, and local Township, and all others that may apply and grants permission for Township officials to enter the above-described property for inspections and/or the purposes of gathering information regarding this permit. The owner(s) understands that this permit will be null and void, if issued for a property illegally split.
- **Other information, including a formal survey, may be requested by the Township prior to approval.**

Applicant's Signature: _____ Date: _____

When completed send application + Fee to: Benona Township, 7169 W. Baker, Shelby, MI 49455

\$50

PROJECT APPROVED _____	PROJECT NOT APPROVED _____
APPROVED: ZONING ADMINISTRATOR SIGNATURE _____	
DATE _____ (Zoning permits are valid for one year from date of issue)	
COMMENTS: _____	