

12-15-2003

**CITY OF CORUNNA  
ZONING PERMIT APPLICATION**

**INSTRUCTIONS**

A Zoning Permit shall be required prior to the erection or structural alteration of any building or structure (including, signs, storage sheds, fences, pools, decks, porches) or portion thereof and prior to the use or change in use of a building or land within the City of Corunna. Construction permits may not be issued until A Zoning Permit is received and approved.

OWNER'S NAME: \_\_\_\_\_  
OWNER'S ADDRESS \_\_\_\_\_  
APPLICANT'S NAME (if not owner): \_\_\_\_\_  
APPLICANT'S ADDRESS: \_\_\_\_\_  
PHONE:: \_\_\_\_\_

PROPERTY ADDRESS / LOCATION: \_\_\_\_\_ IN FLOOD ZONE? YES \_\_\_ NO \_\_\_  
PROPERTY ID# \_\_\_\_\_  
LEGAL DESCRIPTION OF PROPERTY (Attached description acceptable)  
\_\_\_\_\_  
\_\_\_\_\_

**TYPE OF REQUEST (Please circle one)**

NEW CONSTRUCTION      ADDITION      GARAGE      FENCE      POOL      SIGN  
USE PERMIT      AMENDMENT TO A SITE PLAN      SHED      DECK      PORCH  
SPECIAL USE PERMIT      MOVING PERMIT

**EXPLANATION:** Submit a drawing on back of this application or through an appropriate attached site plan giving: 1) All dimensions of property and proposed structure dimensions. 2) Show road including road right-of-way dimensions on drawing. 3) Front, rear, and side yard setbacks from the right-of-way. 4) Any structures (fences, signs, buildings, etc. that may be currently located within the right-of-way). 5) Draw location of any existing or proposed utilities (water, sewer, gas).  
\_\_\_\_\_  
\_\_\_\_\_

**FEE SCHEDULE (Circle one):**    **Make checks payable to City of Corunna**  
Commercial / Industrial / Multi-Family: \$100.00  
Residential / Residential Office / Temporary Permit: \$25.00  
Fax: 989-743-4417

I swear that the above application is true and correct to the best of my knowledge.

**APPLICANT SIGN HERE:** \_\_\_\_\_

\*\*\*\*\* FOR OFFICE USE ONLY \*\*\*\*\*

Date received: \_\_\_\_\_ by \_\_\_\_\_

Approved:  Not Approved:  Zoning Administers signature \_\_\_\_\_

Explanation: \_\_\_\_\_

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Date received: \_\_\_\_\_ by \_\_\_\_\_

Approved:  Not Approved:  Zoning Administers signature \_\_\_\_\_

Explanation: \_\_\_\_\_