

**BURT TOWNSHIP ZONING PERMIT  
APPLICATION**

NEW HOME ( ) ADDITION ( ) EXTRA STRUCTURE ( ) SITE PREPERATION ONLY ( )  
(Driveway, parking or future structure)

PROPERTY ID NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LOT SIZE: \_\_\_\_\_

STRUCTURE HEIGHT: \_\_\_\_\_ (MEASURED FROM LOWEST FINISHED GRADE TO HIGHEST POINT)

CURRENT FRONT SETBACK: \_\_\_\_\_ (FRONT IS THE LAKE SIDE IN WATERFRONT RESIDENTIAL)

PROPOSED FRONT SETBACK: \_\_\_\_\_

CURRENT REAR SETBACK: \_\_\_\_\_

PROPOSED REAR SETBACK: \_\_\_\_\_

CURRENT SIDE SETBACKS: SIDE 1: \_\_\_\_\_ SIDE 2: \_\_\_\_\_

PROPOSED SIDE SETBACKS: SIDE 1: \_\_\_\_\_ SIDE 2: \_\_\_\_\_

OTHER BUILDINGS OR STRUCTURES ON PROPERTY: \_\_\_\_\_

SQUARE FOOTAGE OF FOOTPRINT OF ALL STRUCTURES AS A % OF LOT SIZE: \_\_\_\_\_

SQUARE FOOTAGE OF ALL IMPERVIOUS SURFACES AS A % OF LOT SIZE: \_\_\_\_\_

BUILDER'S NAME AND PHONE #: \_\_\_\_\_

BUILDER'S SIGNATURE: \_\_\_\_\_

OWNER'S NAME & PHONE #: \_\_\_\_\_

OWNER'S PERMANENT ADDRESS: \_\_\_\_\_

I HEREBY GRANT THE MEMBERS OF THE BURT TOWNSHIP BOARD OF APPEALS AND THE BURT TOWNSHIP ZONING ADMINISTRATOR THE RIGHT TO CONDUCT ONE OR MORE INSPECTIONS OF MY PROPERTY, SHOULD THIS BE DETERMINED TO BE NECESSARY BY THE BURT TOWNSHIP ZONING ADMINISTRATOR.

OWNER'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**ALSO REQUIRED: EMAILED SCANS (Not Photos), DVD OR CD DISC CONTAINING PDF FILES (Not Photos) OF THE SITE/PLOT PLAN LAYOUT (SEE Sec 4.02), APPLICATION AND PRINTS, A COPY OF THE OWNER'S CURRENT DRIVER'S LICENSE AND (1) SET OF COMPLETE DRAWINGS (PAPER)**

(Rev 4/2018)

Submit To: James J Larson  
4099 East Burt Lake Rd  
Cheboygan, MI 49721