

BERRIEN TOWNSHIP
8916 M-140, Berrien Center, Michigan 49102 (269) 461-6925 fax (269) 461-3762
Zoning Permit Application

Property Owner _____ Address _____
Phone _____ Job Address _____
Date: _____ Property Number 11- _____ - _____ - _____ - _____

CONTRACTOR INFORMATION
Contractor Name (DBA) _____ Phone _____
License Number _____ Exp. Date _____
Federal Employee Number _____ MESC Employer Number _____
Worker Compensation Insurance Carrier _____

Description of work to be done _____

_____ New _____ Addition _____ Alteration _____ Repair _____ Demolish _____ Move/Other

Submit copies of: _____ Plot Plan _____ Building Plan _____ Sewage Permit _____ Soil Erosion Permit

Zoned: _____ Sewage Permit Number: _____ Soil Erosion Permit Number: _____

Building Detail: Height _____ Width _____ Length _____ Stories _____

Set Backs: Front _____ Rear _____ Side _____ Side _____

Estimated Cost of Construction \$ _____ Square Feet _____

“Section 23A of the Sate Construction Codes Act of 9172, Act No. 230 of the Public Acts of 1972, being Section 125.1523a of the Michigan Compiled Laws prohibits a person from conspiring to circumvent the licensing requirements of this state relating to person who are to perform work on a residential building or a residential structure. Violators of Section 23A are subject to civil fines of not less than \$100.00 nor more than \$500.00.”

Signature of Applicant _____ Email _____ Date _____

Home Owner Affidavit
I hereby certify the building work described on this zoning application shall be installed by me on my property which is zoned agriculture and the structure will be for agricultural use. All work shall be installed in accordance with the Michigan Building Code as enforced by Berrien Township and shall not be covered up or put into operation until it has been inspected and approved by the Building Inspector. I will cooperate with the Building Inspector and assume the responsibility to arrange for necessary inspections.

Signature of Applicant _____ Phone _____ Date _____

OFFICE USE ONLY
Special Conditions _____ Permit No. _____
Date _____ Zoning Administrator: Ross Rogien Phone Number for Inspections: 269-277-8573