

# Blair Township

## ZONING DEPARTMENT

2121 Co. Rd. 633  
Grawn, MI 49637  
231.276.9263

Applications will NOT be accepted unless ALL information and fully completed application are submitted.

Submit ALL of the following:

1. Completed application
2. Site Plan with all dimensions
3. Blue Print & Elevation Drawings (except decks) - 1 set
4. Proof of ownership (if recent change or different at Township)

Additional requirements:

If the property is vacant with no address, an address will need to be established with Grand Traverse County Equalization. (231) 922-4775

For new construction, replacing mobiles, and additions:

-Health Department Permit (231) 995-6051

If in water district:

-Water Permit (231)276-9263 ext.113

If you are located near water, storm water retention basin or a steep hill:

-Soil Erosion Permit (231)995-6041

Two inspections are REQUIRED. Please allow two days for inspections to take place.

1. Staking Inspection: Staking of all four corners of structure before building starts
2. Final Inspection: Call when construction is complete to obtain occupancy permit.

Schedule inspection by call the Zoning office (231)276-9263 ext. 4. No one is required to be at the site at the time of inspections.

You will need to take your land use permit to Grand Traverse County Construction Code for a building permit (231) 995-6044

# Land Use Permit Application

Property Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Property Owner Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

Residential\_\_\_\_ Commercial\_\_\_\_ Industrial\_\_\_\_ Agriculture\_\_\_\_

Structure	Walls	Basement
House _____	Wood Frame _____	Block _____
Garage _____	Post Frame _____	Wood _____
Deck _____	Block _____	Poured Wall _____
Shed _____	Poured Wall _____	Block Crawl _____
Mobile Home _____	Pre-Fab _____	Wood Crawl _____
Office _____	Pre-Engineered Steel _____	Poured Wall Crawl _____
Warehouse _____	Other-Explain _____	Slab _____
Shop _____		Piers _____
Other-Explain _____		

Other: \_\_\_\_\_

Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_ Stories \_\_\_\_\_

Estimated Cost of Project: \_\_\_\_\_  
Distance from Front Line: \_\_\_\_\_  
Distance from Side Line: \_\_\_\_\_  
Distance from Side Line: \_\_\_\_\_  
Distance from Rear Line: \_\_\_\_\_

<b>OFFICE USE ONLY: PERMITS</b> _____ _____ _____ _____
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IN GRANTING OF A PERMIT FOR CONSTRUCTION, ALL APPLICABLE ORDINANCES SHALL BE COMPLIED WITH. IN SIGNING OF THIS APPLICATION, YOU ARE PERMITTING A REPRESENTATIVE OF THE ZONING DEPARTMENT TO DO ON SITE INSPECTIONS.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_  
(by property owner)

<b>OFFICE USE ONLY:</b>			
LUP # _____	Parcel # 28-02- _____ - _____ - _____	Approved _____	Denied _____
Fee \$ _____ .00	Zoned _____	Date Issued _____	Staking _____ Final _____