Schoolcraft County Building and Zoning Dept.
300 Walnut Street, Room 207
Manistique, Mi. 49854
(906) 341-3678
Fax: (906) 341-0282
Applications may be delivered, mailed, faxed or emailed to: buildingandzoning@schoolcraftcounty.us

**Zoning Permit Application**

Applicant:________________________________________ Zip:_______ Phone:_____________
Home Address:________________________________________ Email:__________________________

Site Address (directions):
Proposed land use or structure to be constructed:________________________________________

Tax / Parcel I.D. Number:____________________ Section____ Town____ N Range____ W Zoning District________
(from Tax Equalization Office 341-3677) (completed by Zoning Department)

*On the back of this application or on a separate sheet, provide an ink site plan drawing that includes the following:*

1. Property shape, dimensions, area, and intended use, and it must be **signed and dated** declaring the applicant as the preparer of the document.
2. Kind, dimensions, height, and location (including distance from lot lines) of the CURRENT and PROPOSED improvements and building(s) to be erected, moved or expanded on the property.
3. Sewage disposal and water supply types and locations (when already existing on property).
4. Locations of lakes, streams, roads, driveways, and parking areas.
5. Distance of proposed improvement or building from lake and stream shore lines.

**Incomplete application or site drawing without this information included, will be not be approved!!!**

The location of every improvement or structure on the parcel, according to the approved submitted site plan, is the responsibility of the applicant.

**You will need a Soil Erosion Permit from Health Dept.(906)293-1303, if any of the following exist:**

1. If the land area to be excavated will be one acre (43,560 Square Feet) or more in size.
2. If the earth change is within 500 feet from a lake or stream (some county drains may be considered to be streams)

Before any construction (including new septic systems) commences or any issuance of a building permit is granted, an approved Zoning Application must be on file.

The undersigned applicant hereby swears that the information contained in this application together with any attached exhibits or supplemental information is correct and true.

Signature of Applicant__________________________ Date__________________

Zoning Permit Approval Number____________________ Fee Paid____________________
Approved by Planning Director____________________ Date__________________
SITE PLAN
See front of application items 1 thru 5 to include all information required.
*Drawing does not need to be to scale; but must include dimensions.*

NORTH

PREPARED BY: ____________________________
Owner Applicant Third Party CIRCLE ONE
Date: ______________
Permit will not be approved, if not signed, identified and dated!!!