

ONTWA

TOWNSHIP Township of Ontwa * County of Cass * State of Michigan

www.Ontwatwp.org 26225 U.S. 12 * P.O. Box 209 * Edwardsburg, Mi. 49112 * Fax: (269) 663-0072 * Phone: (269) 663-2347

Date: _____

Application ONT-14-090-_____

Certificate of Zoning Compliance

Important Notice to Applicant: Complete this application in full and submit two (2) copies along with two (2) copies of supporting documents, as required below, to the Ontwa Township Zoning Administrator. Approval of this application is required before a Certificate of Zoning Compliance will be issued. It shall be unlawful to construct, enlarge, alter or permit the use or occupancy of a building or structure or change the use of a building until a Certificate of Zoning Compliance has been issued by the Zoning Administrator.

Further, no excavation shall be initiated, no construction may begin, no building shall be erected, altered, moved, razed and no structural alterations (including but not limited to porches, deck, patios, terraces, fences) shall be initiated until a Certificate of Zoning Compliance has been issued by the Zoning Administrator

The excavation for or erection of a building or structure, prior to the issuance of the permit, is in violation of the **Ontwa Township Zoning Ordinance, Article XX**. References to "Section and "Article" refer to the Zoning Ordinance and may not necessarily identify all parts that apply.

If the Zoning Administrator shall find that any of the provisions of this Ordinance are being violated, he shall notify in writing the persons responsible for such violations, indicating the nature of the violation and ordering the action necessary to correct it. He shall order discontinuation of illegal uses of land, buildings, or structures; removal of illegal buildings or structures; discontinuation of any illegal work being done; or shall take any other action authorized by this Ordinance to insure compliance with, or prevent violations of, its provisions.

Please print or type all information

Applicant(s):
Address: (City, State, Zip)
Phone Number:
Landowner: (If different than applicant)
Applicant/Owner Interest In Property:

PROPERTY INFORMATION:

Street/Road Address:			
Parcel Tax ID:			
Acreage:	Sq. Feet:	35%	Zoned:
Deed Restrictions on the Property?			
Public Utilities on the Property?			
Property Is In:	<input type="checkbox"/> Platt	<input type="checkbox"/> Sub-Division	
Name of Sub-Division:			
Are there Covenant Restrictions:			
Present Use of Property:			
<u>PROPOSED CONSTRUCTION and USE of LAND:</u>			
<u>Compliance Permit is Applied for:</u>			
<input type="checkbox"/>	Single Family Dwelling	<input type="checkbox"/>	Two Family Dwelling
<input type="checkbox"/>	Temporary Building or Structure	<input type="checkbox"/>	Addition or Alteration
<input type="checkbox"/>	Excavation		

Supporting Documents:

Two copies of the items listed below, must accompany this application form. Also, include receipt from Health Department concerning septic system or a certificate from The Ontwa Township Sewer Board for sewer hook-up. Each supporting document must include the name and address of the applicant.

- (1) Proof of ownership of the lot or premises.
- (2) Location, dimensions, and size of the lot or premises.
- (3) Either a Site Plan or a Plot Plan according to the provisions of Article XVI of this Ordinance.
- (4) For a permit for buildings, a written notice of acceptance or hook up fee receipt is required if public sanitary sewer service is available or required by local or state law. If public sanitary sewer service is not available, a written report from the Cass County Health Department certifying the approval of a private septic system is required.
- (5) When a public or private water supply system is required by law or proposed by the applicant, either a written notice of acceptance from the Cass County Health Department or other approval from applicable agencies is required. When use of a public water supply is available or required by local ordinance or state law, a written notice of acceptance or hook-up fee receipt shall be required.

- (6) A drawing, 1" = 100", illustrating the location of the building or structure, the distance from all lot lines, the right-of-way of abutting streets, the location and number of parking spaces, and the location and type of use of buildings on adjacent land.

The Zoning Administrator may require additional materials to aid in determining whether a proposed use, building or structure complies with this Ordinance.

AFFIDAVIT

AFFIDAVIT: I (we) the undersigned affirm that the forgoing answers, statements and information and all attachments, are in all respects true and correct to the best of my (our) knowledge and belief. I (we) the undersigned understand that the Certificate of Compliance Permit applied for, if granted, is issued on the representations made herein and that any Certificate of Compliance Permit or Building Permit subsequently issued may be revoked because of any breach of representations or conditions, or because of the lack of continued conformance with zoning ordinance requirements; and, I (we) the undersigned affirm that if this Certificate of Compliance Permit is approved for an accessory building, the accessory building will not be used as a dwelling, rented, leased or otherwise occupied as a living unit, guest quarters or a dwelling. This type of use will subject me (us) to all penalties associated with the Zoning Ordinance.

(Check One) Applicant(s) Property Owner(s) (if different from applicant (s))

Print Name (s):

Signature (s)

Date: _____

NOTE: This application, when completed, must be returned to the Ontwa Township Zoning Administrator, located in the Ontwa Township Hall. If you need more information or have questions concerning this application or fees, contact Zoning Administrator, LeRoy Krempec. I am available at the Ontwa Hall on Mondays, Tuesdays, from 9:00 a.m. to 3:00 p.m. and Saturdays from 9:00 a.m. to Noon. I may be reached by phone at the number above or at 269-663-2347 on Monday thru Friday from 10:00 a.m. to 4:00 p.m.

FOR TOWNSHIP USE ONLY

Fee: _____ **Date Paid:** _____

Paid by: Cash Check: Check #: _____ Fee paid w/ Building Permit:

Action Taken: Approved:
By: _____
Denied:

Comments:

|