## Village of Ravenna

12090 CROCKERY CREEK DRIVE • RAVENNA, MICHIGAN 49451 • TELEPHONE (231) 853-2360 • FAX (231) 853-6443

## APPLICATION FOR CERTIFICATE OF ZONING COMPLIANCE

[In accordance with Zoning Ordinance Section 190.1701, all land uses shall be reviewed to verify compliance with the Zoning Ordinance. Additional information may be required by the Planning Commission or Village Zoning Administrator.]

Date:		Aj	oplication Fee: \$	
		(m	nust accompany comple	ted application)
1.	Property Address for Certific	cation:		
	Parcel Number:			
	Zone District:		(obtain fr	rom Zoning Administrator)
2.	Applicant Name:			
	Address.			
	City, State, Zip:			
	I HOHC.			
	Relationship of Applicant to	Property Owner:		
3.	Property Owner:			
	Address:			
	City, State, Zip:			
	Phone:			
4.	Current Use of Property:			
5.	Request to construct or alter	:		
	To be used for:			
	Zoning Authorization for Pro	oposed Use (Specif	y Ordinance Section):	
	Approximate start-date of co	nstruction:		
	(If new construction)			
	Building size (in feet	): Length	Width	Height
6.	all data pertinent to the propaccurate property survey. In are available from the Zoning a. Date of the drawin b. Scale; c. North arrow;	osed construction of some cases, the project Administrator upo	r alteration. It is advised perty survey can be used in request. The site plan	property), drawn to scale, showing d that the site plan be based on an as the site plan. Sample site plans shall include at least the following:
				of-way, easements, setbacks, off-

street parking, proposed landscaping, and existing and/or proposed structures and additions.

## 7. Applicant Certification

By my signature below, I certify that I am the property owner, agent of the owner, or authorized by the property owner to submit this application. Further, I certify that the information provided within or attached to this application is, to the best of my knowledge, true and accurate. I hereby authorize the Village to enter the property associated with this application for purposes of conducting necessary site inspections.

Date:	
Ap	pplicant's Printed Name
Ap	oplicant's Signature
***********	*************
For V	VILLAGE USE ONLY:
Date Application Received: Escrow Payment Received:	Application Fee Received: \$ Escrow Payment Charged: \$
Escrow Payment Received:	Escrow Payment Charged: \$
Approved:	Denied:
Approved with the following condition(s):	
Denied for the following reason(s):	
Zoning Administrator/Village Official:	Date:
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