



“The Island City”

City of Plainwell Zoning Permit Application

Fee: \$5.00 – Additional review fees may be imposed

Plainwell City Hall
211 N. Main Street
Plainwell, MI 49080
Phone: 269-685-6821
Fax: 269-685-7282
www.plainwell.org

Permit #: _____

Date of Application: _____

Homeowner information:	Contractor Information:
Name: _____	Company: _____
Address: _____	Company Address: _____
Parcel #: _____	_____
Phone #: _____	Contact name: _____
Email: _____	Phone #: _____

Project Information:

Work to be done (please check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> New Building Construction | <input type="checkbox"/> Moving a Building |
| <input type="checkbox"/> Building Demolition | <input type="checkbox"/> Fence (please submit a drawing of plans) |
| <input type="checkbox"/> Existing Building Addition or Alteration | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Other (please describe): _____ | |

Address of Project: _____ Zoning district: _____

General description of project: _____

Total Cost of Project: _____

Will the work in this application change the USE of this property? Yes No

After the project is complete, the setbacks established will be (if applicable):

Front: _____ feet Back: _____ feet Side: _____ feet Side: _____ feet

Does this project involve a: Non-conforming use Non-conforming structure N/A

Is this a home occupation? Yes No If so, what kind? _____

Any type of special equipment use? _____ Electrical Plumbing

Will this project result in an increase in off-street parking? Yes No

I understand that before the issuance of a building permit, I must have an approved Zoning Permit Application. Additionally, the UNDERSIGNED affirms that he/she/they is (are) the owner of subject property authorized to represent the interests of all property owners involved in this application and that the answers and statements herein contained and all maps, plans, and other information herewith submitted and attached are in all respects true to the best of his/her/their knowledge and belief. Additionally, the UNDERSIGNED acknowledges they have received or have been made available all applicable Ordinances relevant to said project, and further, will comply with said Ordinances.

Signature of Applicant: _____ Date: _____

Administrative Use Only:

Is this project consistent with the Master Plan? Yes No Application: Approved Denied

Signature of Zoning Administrator: _____ Date: _____

Remarks: _____



The City of Plainwell is an equal opportunity provider and employer.

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