



CERTIFICATE OF ZONING COMPLIANCE

Permanent Parcel Number 41-__ - __ - __ - __ - __

Site Address: _____

Applicant Information:

Name: _____

Address: _____

Phone Number: _____ Email: _____

Property Owner Name and Address (if different than above): _____

Note: If application is made by other than the owner in fee it shall be accompanied by a duly verified affidavit of the owner or agent thereof that the application and the proposed work or operation is authorized by the owner in fee. If the owner or lessee is a corporate body, the full name and address of the responsible officers shall also be provided.

Description of Use of Site/Structure: _____

* Please attach plot plan required by Zoning Ordinance Sec. 78-63

***** ALL OF THE ABOVE INFORMATION IS REQUIRED *****

Certificate required prior to new construction or alterations of existing structures. Two copies of scaled site plans meeting the requirements of the Zoning Administrator must accompany the application. In case of any false statement or misrepresentation of fact on the application or plans on which the certificate is based, any zoning compliance certificate issued thereto shall be deemed null & void.

APPLICANT STATEMENT:

I hereby acknowledge the above facts, and those on the attached site sketch and prints to be true to the best of my knowledge and state that said construction and/or occupancy of the structure and/or site shall occur in accordance with this certificate. Further, I agree to give permission for officials of the Township, county and State of Michigan to enter the property for purposes of inspection.

Applicant Signature

Date

TO BE COMPLETED BY ADA TOWNSHIP

I hereby certify that I have reviewed the plans for compliance with the Ada Township Zoning regulations, and make the following determination:

Zoning Compliance Permit: Approved Denied

Comments/Reasons for Denial: _____

Zoning Administrator Signature: _____ Date: _____

Updated 10/11/18