



# City of Springfield

601 Avenue A, Springfield, MI 49037

Phone: 269-441-9273 Fax: 269-965-0114 Web Site: www.springfieldmich.com

## Zoning Permit Application

*(For Fences 6 Feet in Height or Less; Accessory Buildings – Residential 200 sq. Feet in Area or Less and Commercial 120 Sq. Ft. or Less)*

**PLEASE TYPE OR PRINT**

Date Submitted: \_\_\_\_\_

**I. LOCATION OF CONSTRUCTION** Address: \_\_\_\_\_

**II. TYPE AND COST OF BUILDING**

**A. PRINCIPAL USE:**

Residential (\$50.00)

Commercial (\$50.00)

**B. TYPE OF IMPROVEMENT:**

Accessory Building

Addition to Accessory Building

Fence

**C. COST:**

Cost of Improvement: \$ \_\_\_\_\_

**D. DIMENSIONS: (Accessory Building)**

Total Square Feet: \_\_\_\_\_

**III. PROJECT DESCRIPTION:** \_\_\_\_\_

**IV. LICENSED BUILDERS INFORMATION:** General Contractor: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_

License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Worker's Disability Compensation Insurance: Carrier: \_\_\_\_\_

IRS Employer #: \_\_\_\_\_ MESC Employer #: \_\_\_\_\_

**V. OWNER OR LESSEE INFORMATION:** Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: ( ) \_\_\_\_\_ Fax #: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Inspector Approval:** \_\_\_\_\_

**Site Plan:** A plan showing the size and location of new construction and all existing structures on the site with distances from lot lines. **DO NOT INCLUDE ROAD RIGHT OF WAYS IN YOUR MEASUREMENT.**



**OFFICIAL USE ONLY**

Zoning Permit Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_

TOTAL AMOUNT: \$ \_\_\_\_\_