

**HUDSON TOWNSHIP**  
**CHARLEVOIX COUNTY, MICHIGAN**

**Application for Zoning Permit**

Case Number _____	Application Fee _____
Permit Number _____	Date Received _____
Expiration Date _____	Action Taken _____

**No application will be accepted and no permit will be issued until all applicable fees are received**

**TYPE OR PRINT CLEARLY**, making sure all information is provided as specified in the Hudson Township Zoning Ordinance for the appropriate zoning district. Missing or incomplete information may result in denial of zoning permit.

1. Name of Fee Owner(s) \_\_\_\_\_
2. Owner's Mailing Address \_\_\_\_\_
3. Owner's Phone Number(s) \_\_\_\_\_
4. Property Address (if different from above) \_\_\_\_\_
5. Name of Duly Authorized Legal Agent, if applicable \_\_\_\_\_
6. Agent's Mailing Address \_\_\_\_\_
7. Agent's Phone Number(s) \_\_\_\_\_
8. Legal Description of Property for which a Zoning Permit is being requested:  
(Attach separate sheet if necessary)

9. Tax Description Code Number \_\_\_\_\_
10. Zoning District Classification in which Property is located \_\_\_\_\_

11. This area is:     Unplatted  
                           Platted  
  Name of Plat \_\_\_\_\_
- To be Platted  
  Name of Plat \_\_\_\_\_

12. Are there any dedicated right-of-ways or easements which abut or traverse part or all of the subject property? \_\_\_\_\_  
      If yes, illustrate location on sketch plan

(continued on other side)

*Hudson Township is an equal opportunity provider*

**[www.hudson-township.org](http://www.hudson-township.org)**

HUDSON TOWNSHIP ZONING PERMIT APPLICATION  
CHARLEVOIX COUNTY, MICHIGAN

13. What are the exterior dimensions of this building? \_\_\_\_\_
14. What is the height of this building? \_\_\_\_\_
15. Type of Use (check all that apply):
- Single Family Residence
  - Two Family Residence (Duplex)
  - Multiple Family (# of Units \_\_\_\_\_)
  - Mobile Home – Year Manufactured \_\_\_\_\_
  - Addition – Type \_\_\_\_\_
  - Accessory Building – Type \_\_\_\_\_
  - Recreational Vehicles (Expire in 90 days) – Type \_\_\_\_\_
  - Industrial / Commercial - Type \_\_\_\_\_
  - Other \_\_\_\_\_
16. Indicate the following items on the attached sketch plan:
- a) Existing or intended use of structure
  - b) Lot lines with dimensions of the lots, and distance from the lot lines to the structure.
  - c) Evidence that all required licenses or permits have been acquired or that applications have been filed for same.
  - d) Other information with respect to proposed structure, use, lot and adjoining property as may be required according to specifications listed in the Hudson Township Zoning Ordinance. (i.e. utilities, roads, easements, buildings, etc)

I hereby depose and say, under the penalties of perjury, that all of the statements and/or information contained herein and submitted with this application are true. If any statements and/or information are found later to be false, this permit shall become null and void.

\_\_\_\_\_  
Owner's or duly authorized legal agent's signature

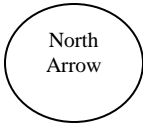
Subscribed and sworn before me this  
\_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_\_

Notary Public \_\_\_\_\_

County of \_\_\_\_\_ State of \_\_\_\_\_

My Commission Expires \_\_\_\_\_

HUDSON TOWNSHIP ZONING PERMIT APPLICATION  
CHARLEVOIX COUNTY, MICHIGAN



SKETCH PLAN

•Lot Dimensions •Location & name of road or street •Locate proposed & existing structures & distances to lot lines

A large grid of 30 columns and 30 rows, intended for drawing a sketch plan.

Revised 4/1/2012