ZONING COMPLIANCE PERMIT DUNDEE TOWNSHIP

179 Main Street Dundee, MI 48131 Phone: 734-529-2650

Fax: 734-529-5909

Location of Building/Improve	ment		
Address			
Parcel ID #	Lot Area Zoning		
Owner			
Name	Telephone #		
Address	City	State	Zip Code
Contractor, Architect or Engir	neer		
Name	Telephone #		
Address	City	State	Zip Code
Builders License No. Description of Improvement	Expiration Date		
Description of Improvement			
Type of Improvement			
Dimensions	Floor Area		Height
Applicant Signature			
□ I hereby certify that I am the owner of record and that we agree to conform to all applicable laws of the state of Michigan and to all applicable Dundee Township Ordinances. All information submitted on this application is accurate to the best of my knowledge. □ I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owners to make this application as his authorized agent, and we agree to conform to all applicable laws of the state of Michigan and to all applicable Dundee Township Ordinances. All information submitted on this application is accurate to the best of my knowledge.			
Name	Application Date		
Zoning Compliance			
Zoning Compliance Permit#	Permit Fee	Во	nd Amount
Approved By			ue Date
Building Permit also required ☐ Yes ☐ No	This zoning compliance permit does not authorize work under any building permit or other permits required by county or state agencies. The land owner is responsible for securing all other necessary township, county and state permits.		