



7227 West Q Ave
Kalamazoo, MI 49009
P: 269-548-4305
www.texastownship.org

ZONING PERMIT REVIEW APPLICATION

APPLICATION

I (we), the undersigned do hereby submit a completed and signed application, dimensioned sketch plan and any other necessary drawings, supporting documentation, and the review fee, for the purpose of obtaining zoning approval from the Zoning Administrator. In making this application, I (we) acknowledge that the Planning and Zoning Department has discretion to impose reasonable terms and conditions required by the Zoning Ordinance as a provision of any considered approval.

Please review the [Texas Township Zoning Ordinances](#) that pertain to your project prior to submission of your application.

APPLICANT INFORMATION

Applicant Name: _____

Email: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

PARCEL INFORMATION

Subject Parcel Number: 3909- _____ - _____ - _____

Subject Parcel Street Address: _____

Current Zoning Classification: _____

Area of Subject Property: Acres: _____ - OR - Square Feet: _____

LEGAL OWNER INFORMATION (if different from applicant)

Legal Owner of Parcel: _____

Legal Owner's Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Above legal owner has consented to this application. Yes: _____ No: _____

NATURE OF REQUEST

- Fence**
- Accessory structure – outdoor fireplace, gazebo, detached deck, etc. (not requiring a building permit)**
- Accessory building under 200 square feet**
- Agricultural building (not requiring a building permit)**
- Above ground pool**
- Small livestock – parcels only (please include waste management plan per Section 36-4.2.9)**
- Temporary use: Start date (including setup): _____ # of days (including teardown): _____**
- Change of use: Current use: _____**

ZONING REVIEW

Proposed use: _____

DEVELOPMENT INFORMATION

General Description of Proposed Project: _____

Construction Start Date: _____

Expected End Date: _____

*Please schedule a final Zoning Inspection, online or by telephone, upon completion of your project.

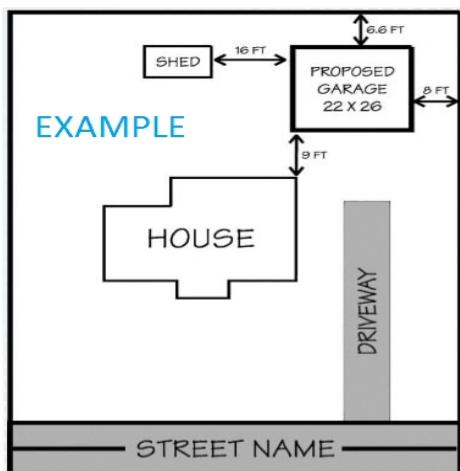
Signature of Property Owner: _____ Date: _____

Signature of Applicant (if different from property owner): _____ Date: _____

Sketch Plan

The applicant must provide a sketch plan with this application. Refer to example. Include all proposed buildings/structures, their relation to existing buildings/structures, their dimensions, setbacks from property lines and rights-of-way. Indicate any

utilities or other public/private easements. Any bodies of water should be noted as well. Riparian lots follow the standards in Section 36-6.4



SITE PLAN FOR GARAGE

Zoning District	House Front	House Sides	House Rear	Accessory Sides	Accessory Rear
A	75'	20'	50'	12'	20'
R-1	40'	12'	40'	12'	20'
R-1A	40'	12'	40'	12'	5'
R-2	40'	12'	35'	12'	5'
R-3	40'	10'	30'	5'	5'
R-4	40'	10'	30'	5'	5'
R-5	40'	10'	30'	5'	5'
R-6	15'	10'	15'	25'	25'

*Accessory buildings with a maximum area of 200 sq ft and a maximum height of 8 ft, require only a 5 ft setback off rear and side property lines.

OFFICE USE ONLY:

Date Received: _____ Time: _____ Received By: _____

App Fee Paid: \$50.00 Check #: _____

ZONING REVIEW ACTION:

Approved Approved with conditions

List conditions of approval:

Reasons for denial:

ZONING REVIEW

Community Development Specialist's Signature: _____