

# BEAR LAKE TOWNSHIP

## LAND USE APPLICATION

Submit Completed  
Land Use  
Applications with Site  
Plan and Payment to:

Manistee County Planning Dept.

231-723-6041

or

planning@manisteecountymi.gov

*\*Make checks out to Bear Lake Township*

### Land Use Permit Fees

0 - 999 sq. ft.	\$40 <sup>00</sup>
999 - 1999 sq. ft.	\$50 <sup>00</sup>
1999 - 2999 sq. ft.	\$60 <sup>00</sup>



# BEAR LAKE TOWNSHIP

## LAND USE PERMIT APPLICATION

**FROM:**

**PROPERTY OWNER'S NAME AND ADDRESS:** (if not the applicant)

\_\_\_\_\_  
(applicant)

\_\_\_\_\_

\_\_\_\_\_  
(address)

\_\_\_\_\_

\_\_\_\_\_  
(city, state, zip)

\_\_\_\_\_

\_\_\_\_\_  
(telephone, home and business)

Phone: \_\_\_\_\_

**APPLICANT'S CAPACITY IF NOT THE PROPERTY OWNER (Check box) \*\***

Builder

Have option to purchase

Other

**\*\* (Applicant must have a written statement from the property owner to act as their agent, use space below)**

\_\_\_\_\_

**CONSTRUCTION SITE ADDRESS** (if known)

\_\_\_\_\_

Parcel Tax I.D. Number 51- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Section: \_\_\_\_\_

Zoning District: \_\_\_\_\_

Parcel Size: \_\_\_\_\_

**Size of Proposed Structure, Building, Addition, etc.:**

\_\_\_\_\_

**Height of Proposed Building Structure Addition, etc.:**

\_\_\_\_\_

**Proposed Use of Building, Structure, Addition, etc.:**

\_\_\_\_\_

Proposed Setbacks:

**Front:** \_\_\_\_\_ **Rear:** \_\_\_\_\_ **Side:** \_\_\_\_\_ **Road Yard:** \_\_\_\_\_ **Water Yard:** \_\_\_\_\_

### **SITE PLAN MUST BE INCLUDED WITH APPLICATION**

**(SPEAK WITH THE ZONING ADMINISTRATOR TO DETERMINE SPECIFIC SITE PLAN REQUIREMENTS)**

**AFFIDIVIT:** I verify that the information and statements made in this application are true and accurate, and understand if found not to be true,

any land use permit that may be issued, may be revoked. Further, I agree that any permit that may be issued is with the understanding that I/we will comply with all applicable Sections of the Bear Lake Township Zoning Ordinance. Also, I agree to notify the Bear Lake Township Zoning Administrator **BEFORE** the start of any construction, when the proposed uses are marked on the ground for the purpose of a pre-construction inspection. Further, I understand that this is a permit application (not a permit) and that a Land Use Permit, if issued, conveys only land use rights, and does not include any representation or conveyance of rights in any other statute, building code or deed restriction of other property rights. Further, I agree that if a Land Use Permit is issued, I give permission for officials from the State of Michigan, Manistee County and Bear Lake Township to enter the property for the purposes of inspection.

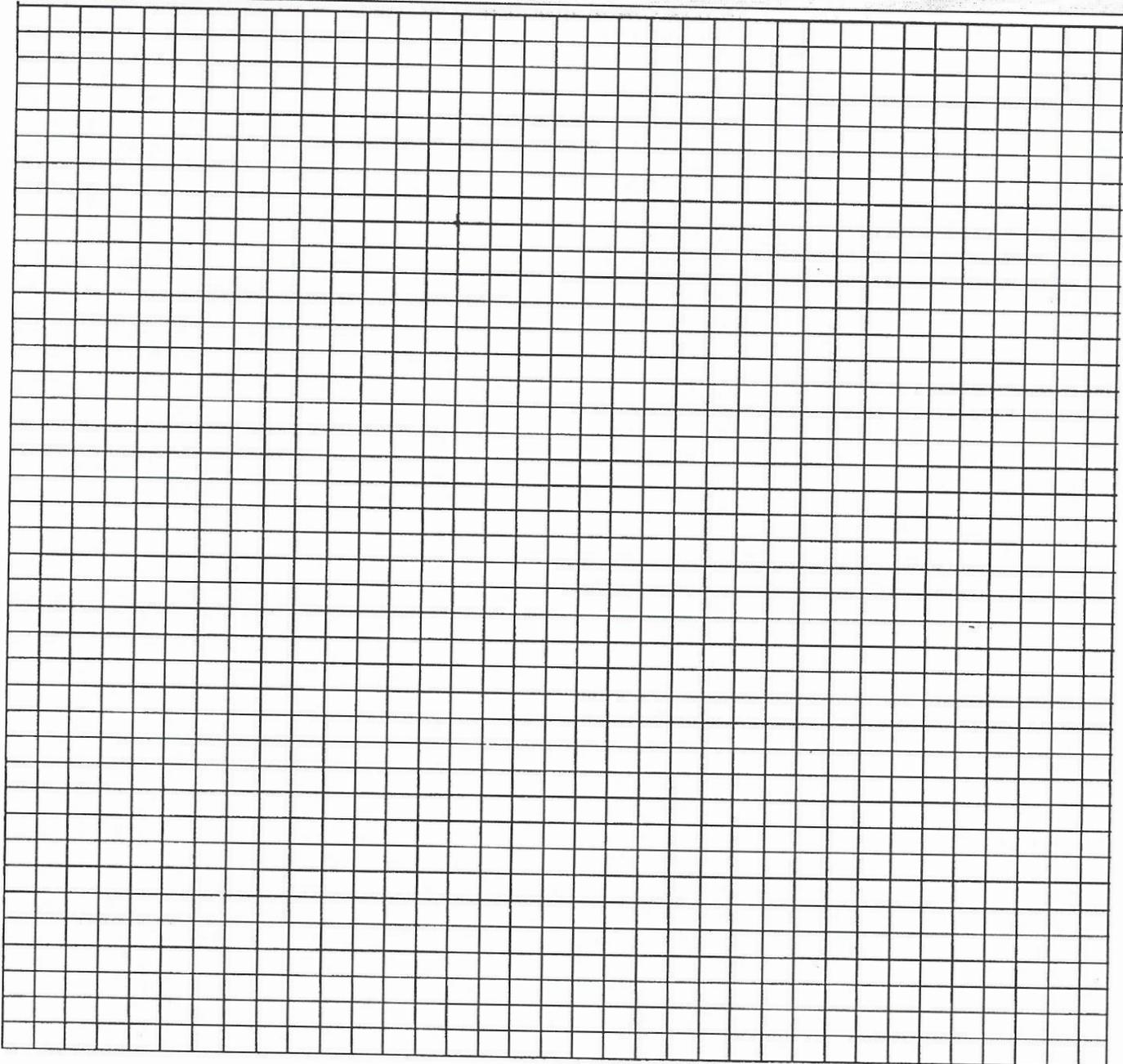
**Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**WHEN COMPLETED SEND TO:** Bear Lake Township Zoning Administration  
Manistee County Planning Department  
395 Third St.  
Manistee, MI 49660

Phone (231)723-6041  
FAX (231)398-3526  
e-mail: [planning@manisteecountymi.gov](mailto:planning@manisteecountymi.gov)

**SITE OR PLOT PLAN - FOR APPLICANT USE**  
**NORTH**



**~ IMPORTANT ~**

1. ROAD FRONTAGE
2. PROPERTY DIMENSIONS
3. BUILDING DIMENSIONS
4. BUILDING SET BACK FROM ALL PROPERTY LINES
5. ALL PRIVATE ROADS CONFORMING TO THE ZONING ORDINANCE MUST BE CONSTRUCTED BEFORE PERMIT CAN BE ISSUED.

**INSPECTION DATE**

Empty box for recording the inspection date.

**CHUCK ERICKSON, *Building Inspector***  
**(231) 360-7386**

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***When Applying For A Building Permit Please Include The Following:***

1. **LAND USE PERMIT OR ZONING PERMIT:**  
Issued under supervision of Bear Lake Township by the Manistee County Planning Dept.  
Contact 231-723-6041 or [planning@manisteecountymi.gov](mailto:planning@manisteecountymi.gov)
2. **HEALTH DEPARTMENT PERMIT -(Well & Septic):**  
Issued by the Manistee County Health Department. Contact (231) 723-3595.
3. **SOIL EROSION PERMIT:**  
If the project will disturb one or more acres of land or is within  
500 feet of a lake, river or stream. Contact Manistee County Planning Dept. at  
(231) 723-6041 or [planning@manisteecountymi.gov](mailto:planning@manisteecountymi.gov)
4. **COUNTY ADDRESS:**  
Issued by the Manistee County Planning Dept. Contact (231) 723-6041 or  
[planning@manisteecountymi.gov](mailto:planning@manisteecountymi.gov)
5. **PLANS:**  
Submit plans drawn with sufficient detail and clarity, showing dimensions as well  
as the following: Foundation details, floor, wall, roof and stairwell framing, door &  
window sizes, roof covering, smoke detector locations, insulation and ventilation.  
Note: Always have a set of drawings available at the job site.
6. **MOBILE HOMES:**  
Submit a set of plans for foundation and method of anchoring unit to the foundation,  
including the size of the unit and the mobile home manufacturer's name.
7. **FEES:**  
Include the Permit Fee, made payable to the State of Michigan. Please call (231)  
360- 7386 or (517) 241-9317 for the fee calculation or a fee schedule.  
361- ***Please have dimensions available.***

**SEND THE COMPLETED BUILDING PERMIT APPLICATION ALONG  
WITH COPIES OF THE ITEMS LISTED ABOVE THAT APPLY TO:**

BUREAU OF CONSTRUCTION CODES & FIRE SAFETY  
BUILDING DIVISION  
P.O. BOX 30254  
LANSING, MI 48909