

Contractor \_\_\_\_\_  
License # \_\_\_\_\_

PERMIT # \_\_\_\_\_  
Date \_\_\_\_\_

# MITCHELL TOWNSHIP

## Land Use Zoning Permit

PROPERTY TAX NUMBER \_\_\_\_\_

NAME \_\_\_\_\_ BUILDER \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

BUILDING LOCATION \_\_\_\_\_

BUILDING SIZE: WIDTH \_\_\_\_\_ LENGTH \_\_\_\_\_ HEIGHT \_\_\_\_\_

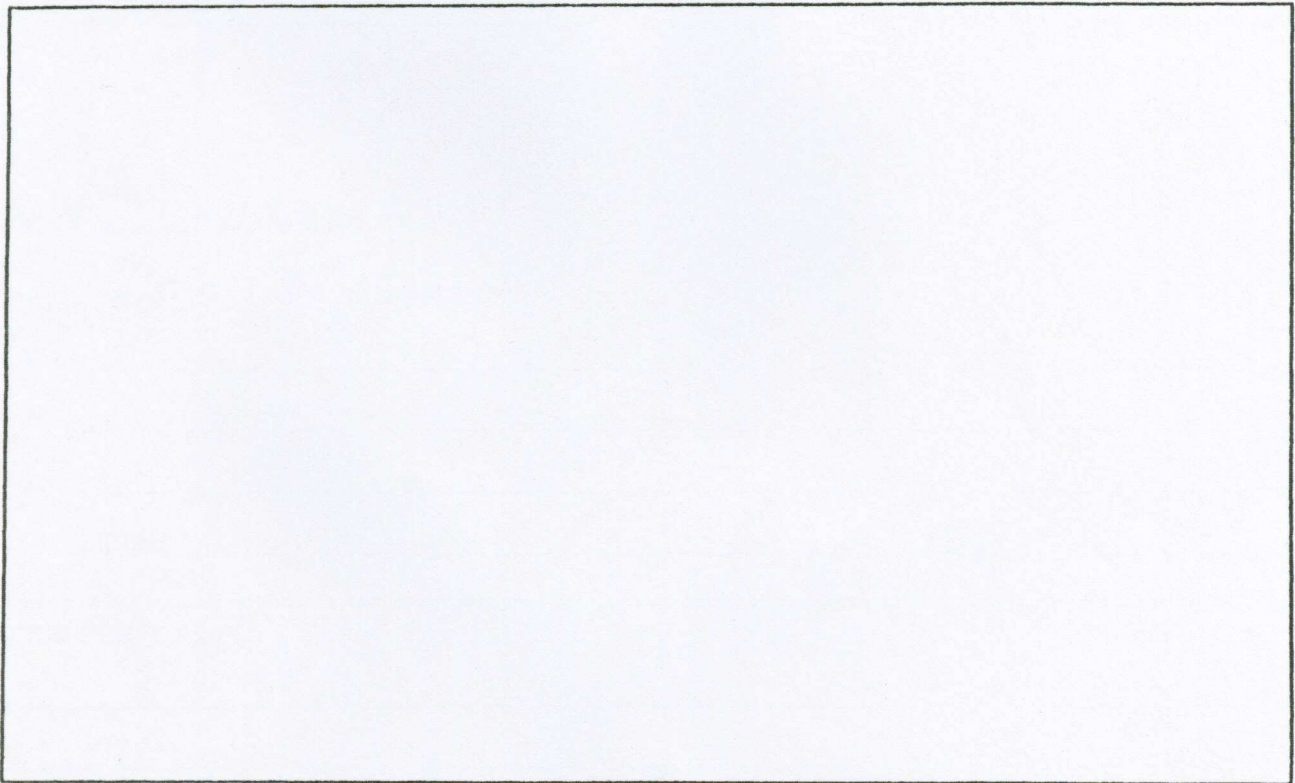
CONSTRUCTION MATERIAL \_\_\_\_\_

SUBDIVISION NAME - LOT NUMBER OR DESCRIPTION \_\_\_\_\_

SIGNATURE \_\_\_\_\_

PLACE BELOW, LOT SIZE AND PROPOSED LOCATION OR BUILDING LOT.

### SITE PLAN



THE ABOVE TO COMPLY WITH  
APPROVED:

ZONING ORDINANCES.

\_\_\_\_\_  
ZONING ADMINISTRATOR

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE