



Planning & Zoning Department
12803 S. Wacousta Rd., Grand Ledge, MI 48837
517-626-6593
www.watertownmi.gov

Application for Residential Zoning Permit

Use For: *New residences, additions, decks, porches, pole barns, etc.*

Applicant Name: _____

Applicant Address: _____

City/State/Zip Code: _____

Phone Number: _____ ☐ Cell ☐ Work

Email Address: _____

☐ Check here if Applicant is Property Owner

Property Owner Name: _____

Property Owner Address: _____

City/State/Zip Code: _____

Phone Number: _____ Email: _____

Permit Address: _____

Proposed Construction/Development: _____

Size/Square Footage of Proposed Development: _____

Affidavit of Compliance:

- I attest that I am the owner of the described property, or the authorized agent of said owner, and that the specifications of the building or structure, the plot plan, the proposed use of lot, and the property description, which I have submitted, are true and correct to the best of my knowledge.
- I agree to comply with all federal, state, and local laws and ordinances as the same apply to the proposed project site, the lands, waters, air and all uses established in or on them; all plant and animal life and health, safety and welfare of those individuals which the project will or may impact.
- I give my consent to permit the Zoning Administrator and/or Building Inspector or a designee of one or both of those officials to make reasonable inspections of the property.
- I understand this permit will become invalid if the proposed project does not begin within six months.

Applicant Signature

Date

DEPARTMENT USE ONLY

Site Inspected By: _____ Date: _____ ☐ Approved ☐ Denied

Comments: _____

Zoning Administrator Signature: _____

Parcel No. 19-150-_____

Permit No. _____ Date Filed: _____ Fee \$65.00 Receipt No. _____