



## Zoning Application

115 South Main Street · P.O. Box 389 · Webberville, MI 48892 · Ph: 517-521-3984 · Fax: 517-521-3165

Applicant:	Owner:
Name: _____	Name: _____
Address: _____	Address: _____
Phone: _____	Phone: _____
Fax: _____	Fax: _____

Parcel Number: \_\_\_\_\_ Lot Dimensions: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Legal Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe Request: \_\_\_\_\_

**ON THE BACK OF THIS APPLICATION OR ON A SEPARATE SHEET OF PAPER PLEASE DRAW OUT THE SITE PLAN FOR PROPOSED PROJECT.**