



# ZONING COMPLIANCE PERMIT APPLICATION

CITY OF LIVONIA – BUILDING INSPECTION

33000 CIVIC CENTER DRIVE

LIVONIA, MI 48154

(734) 466-2580



PLANNING RESOLUTION

BUILDING PERMIT # \_\_\_\_\_

# \_\_\_\_\_

SEWER REC# \_\_\_\_\_

COUNCIL RESOLUTION

WATER REC# \_\_\_\_\_

# \_\_\_\_\_

## FILL IN ALL ITEMS LISTED BELOW

APPLICANT EMAIL: \_\_\_\_\_

### APPLICANT OR CONTRACTOR

PHONE

Address

City

State

Zip

### PROPERTY OWNER

PHONE

Address

City

State

Zip

### OCCUPANT (NAME OF BUSINESS)

PHONE

### LOCATION (# and Street):

Between (nearest cross streets)

St. and

St.

Lot Number

Lot Size:

ft. WIDE by

ft. DEEP

### ZONING COMPLIANCE FOR CHANGE OF USE AND/OR OCCUPANCY:

Portion of Building Involved (sq. ft.)

Describe Building Usage (in detail, include products handled, stored or sold):

### GENERAL INFORMATION REQUIRED – ANSWER ALL THAT APPLY

Seating Capacity – Restaurants, Bars, Theaters, Churches, etc.:

Number of Chairs – Beauty Parlors, Barber Shops:

Parking Spaces Required:

Provided:

Number of employees: Male

Female

Number of Rest Rooms in the Portion of Building Involved:

Will flammable liquids be used or stored on premises (See *Chemical Survey* form)?

Describe:

Qty.

Gal.

Will motor vehicles be driven or stored in building?

If Yes, how many?

Does this Building have a Fire Suppression System?

Cost: \_\_\_\_\_

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS AUTHORIZED AGENT AND WE AGREE TO CONFORM TO ALL APPLICABLE ORDINANCES OF THE CITY OF LIVONIA.

**AS THE APPLICANT OR CONTRACTOR, YOU WILL BE RESPONSIBLE FOR OBTAINING ALL BUILDING INSPECTIONS!**

\_\_\_\_\_  
SIGNATURE OF APPLICANT OR OWNER

PRINT NAME: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_

DATE: \_\_\_\_\_

**NOT TO BE FILLED IN BY APPLICANT**

**ZONING EXAMINATION:**

Permit is to be issued for:

Bldg: \_\_\_\_\_ Employees: \_\_\_\_\_ Last Use: \_\_\_\_\_

Zoning Grant: \_\_\_\_\_ P.C.# \_\_\_\_\_ C.R.# \_\_\_\_\_

Zoning District: \_\_\_\_\_ Section: \_\_\_\_\_ Use Group: \_\_\_\_\_

REMARKS:

Approved by: \_\_\_\_\_, Examiner Date: \_\_\_\_\_

**ENGINEERING EXAMINATION:**

Type: \_\_\_\_\_ Use Group: \_\_\_\_\_ sq. ft. \_\_\_\_\_ cu. ft. \_\_\_\_\_

Approved by: \_\_\_\_\_, Examiner Date: \_\_\_\_\_

Estimated Cost \_\_\_\_\_ Permit Fee \_\_\_\_\_

Construction Bond \_\_\_\_\_ Zoning Fee \_\_\_\_\_

Admin Fee \_\_\_\_\_

Other \_\_\_\_\_

Total Fee \_\_\_\_\_