Village of Spring Lake
102 W. Savidge, Spring Lake, MI 49456
Phone: (616) 842-1393 Fax: (616) 847-1393

ZONING REVIEW REQUIREMENTS

Applicant information (Applicant is the party responsible for doing the work)
Name ____________________________________________________________
Address __________________________________________________________
Phone __________________ Fax __________________
Cell Phone __________________ Email __________________

Owner information (If different from applicant)
Name ____________________________________________________________
Address __________________________________________________________
Phone __________________ Cell Phone __________________
Email __________________

Property information
Address/Location __________________________________________________
Parcel # 70-03- _______ Width _______ Length _______
Subject Property size (acres of sq ft) _______ Required Setbacks: Front _____ Side _____ Rear _____
Current Zoning __________________________________
Required Setbacks: Front _____ Side _____ Rear _____
Setback Provided: Front _____ Side _____ Rear _____

Type of Proposed Structure and/or Use: _________________________________

1. Is the property within 500 feet of a stream, wetland, or lake? ☐ Yes ☐ No
   If yes, please describe: _____________________________________________
2. Will the project require excavation of more than one acre? ☐ Yes ☐ No
3. Are new water and/or sewer systems part of the project on this application? ☐ Yes ☐ No
4. Is the property designated as a historical landmark? ☐ Yes ☐ No

Plot Plan Required: Please provide a scaled drawing, preferably a survey, of the entire subject parcel with details of your proposed work including the following information:

☐ Exact location of all existing and proposed buildings, structures (including decks and retaining walls over 2 feet) and their distances to lot lines.

☐ All dedicated easements (ingress/egress/utility/drainage)

☐ Location of septic tanks/drain fields, wells, or water/sewer lines

☐ Streets, driveway location, approximate length of driveway and culverts (driveways and culverts are required to be at least five feet from the side or rear lot line).

☐ Lot coverage calculations (percentage of building footprints covering the total land area).

☐ Access road location and driveway length and location.

☐ Flood plain elevations, wetlands, streams, lakes, rivers, as applicable.

CONTINUED ON OTHER SIDE
Additional Information Required:

- Scaled building elevations with existing and proposed finished grades
- Scaled floor plans and total building square footage (new residences/additions)
- Driveway Permit, if applicable
- Proof of ownership
- Proof of portable restroom on site (new residences only).
- Proof of water/sewer – All permits/receipts must be presented at time of application.

It is the responsibility of the permitee and property owner to understand any special requirements or restrictions on the parcel or lot, including, but not limited to, Planned Unit Development conditions, regulated wetlands, drainage/grading plans and easements. Failure to comply with applicable requirements or restrictions may result in permit denial or the issuance of a civil infraction.

Many residential developments have specific requirements set forth in homeowner’s association master deed or covenants. The Village of Spring Lake does not enforce said rules; however it is recommended that applicants check with their homeowner’s association prior to making application with the Village.

NO BUILDING ACTIVITY, INCLUDING LAND CLEARING AND EXCAVATION ACTIVITIES, SHALL OCCUR ON SITE UNTIL ALL ASSOCIATED PERMITS (I.E. ZONING, BUILDING, WETLAND, SOIL EROSION) HAVE BEEN ISSUED FOR THE PROPOSED CONSTRUCTION ACTIVITY. FAILURE TO COMPLY MAY RESULT IN A CIVIL INFRACTION OR DENIAL OF PERMITS.

I hereby attest that the information on this application form is, to the best of my knowledge, true and accurate and I have read the information presented in this permit.

_________________________________________ Date
Signature of Applicant

_________________________________________ Date
Signature or Property Owner (if different from applicant)

For Office Use Only

☐ APPROVED  Conditions, if any

☐ DENIED  Reasons (cite §)

_________________________________________ Date
Signature

DPW _______________ Fire Chief _______________