

Zoning Permit No. \_\_\_\_\_

**APPLICATION for a ZONING PERMIT  
In Accordance with Chapter 18 of the Zoning Ordinance  
Baroda Township, Berrien County, Michigan**

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owners Name: \_\_\_\_\_

Property address: \_\_\_\_\_

Permanent Parcel Number: \_\_\_\_\_ Zoning District: \_\_\_\_\_

If a structure, give dimensions: \_\_\_\_\_

Setbacks: front \_\_\_\_\_ rear \_\_\_\_\_ side \_\_\_\_\_ side \_\_\_\_\_

Non-Residential

Name of business (if applicable): \_\_\_\_\_

Existing use: \_\_\_\_\_

Explain the proposed use: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A SITE PLAN MUST ACCOMPANY THIS APPLICATION, and include the following information:**

- |  |  |
|--|--|
| <b>1. dimensions of lot and acreage;</b>   | <b>6. location of all roads bordering or on the property, all driveways, parking areas and pavement;</b> |
| <b>2. location with distance to lot lines of all existing and proposed structures;</b> | <b>7. location of any lakes, rivers, streams or wetlands on or near the property;</b>                    |
| <b>3. setbacks as measured in feet &amp; inches</b>                                    | <b>8. location of any easements on the property;</b>   |
| <b>4. dimensions of all existing and proposed structures;</b>                          | <b>9. indication of north on the drawing;</b>  |
| <b>5. distance between all existing and proposed structures;</b>                       |  |

Applicant's Signature \_\_\_\_\_ date \_\_\_\_\_

Property Owner's Signature (Required) \_\_\_\_\_ date \_\_\_\_\_

Property Owner's Address \_\_\_\_\_ phone \_\_\_\_\_

It is the applicant's responsibility to meet the requirements of the Township Zoning Ordinance in all respects and to provide the necessary information to the Township for approval. Copies of the Ordinance may be obtained from the Zoning Department. By signing, permission is granted for Township staff to enter the subject property for purposes of gathering information to review this request. A Zoning Permit MUST be obtained prior to building, occupying, operating or use. Please be prepared to have a photocopy of your driver's license taken.

**BARODA TOWNSHIP  
ZONING AND BUILDING PERMIT PROCEDURES**

**Step 1** Apply for a secure and satisfactory perk test and septic system layout from the Berrien County Health Department, 2106 S. M 139, Benton Harbor, MI 49022; Phone (269) 927-5623 or a sanitary sewer system tap in permit from the appropriate sewer district (If applicable).

Apply for and secure a driveway permit from the Berrien County Road Commission 9210 Hills Rd, Baroda, MI 49101 of PO Box 768 Benton Harbor MI 49022; Phone (269) 925-1196 (If Applicable).

**Step 2** Complete a zoning permit application and building permit application, and submit them to the township clerk along with the items listed below. (As Applicable)

1. A copy of the septic tank or sewage tap permit.
2. A copy of the driveway permit.
3. A copy of the legal description of the lot or parcel.
4. A sketch map showing the proposed improvement or use on the property.
5. A set of building plans (These will be retained by the township).
6. The zoning permit fee of \$75.00

**Step 3** Upon receipt of the zoning permit, stake out the building on the property and contact the Zoning Administrator for an inspection.

**Step 4** Upon sign off of the zoning permit application by the Zoning Administrator, submit it to the Building Inspector for review and issuance of the building permit.

<b>Phone Numbers</b>	Zoning Administrator	(269) 999-0213	Ryan Keough
	Building Inspector	(269) 277-8573	Ross Rogien
	Electrical Inspector	(269) 471-5869	Ken Simpson
	Plumbing and Mechanical Insp.	(269) 651-4567	John Dobberteen
	Baroda Township Office	(269) 422-2300	Christina Price

Zoning Permit # \_\_\_\_\_

For Office Use Only

Date of application: \_\_\_\_\_ Fee due with application: \_\_\_\_\_ Date paid: \_\_\_\_\_

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Property Owners Name: \_\_\_\_\_ Project Address: \_\_\_\_\_

Zoning Administrator or designee: Proposed use allowed: yes \_\_\_\_\_ no \_\_\_\_\_

Complies with Ordinance Section: \_\_\_\_\_ SUP required? \_\_\_\_\_ Obtained? \_\_\_\_\_

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Date: \_\_\_\_\_ Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Inspections:

Date: \_\_\_\_\_ Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Temporary Zoning Compliance Permit needed? \_\_\_\_\_

If yes, reason: \_\_\_\_\_

Pended for what date: \_\_\_\_\_

Zoning Compliance Permit approved: \_\_\_\_\_ Date: \_\_\_\_\_

Conditions: \_\_\_\_\_

Zoning Administrator or designee signature: \_\_\_\_\_

\_\_\_\_\_