



**CITY OF ADRIAN**  
 135 E. MAUMEE STREET | ADRIAN, MICHIGAN 49221  
 P: 517-263-2161 | F: 517-264-8016 | CITYHALL@ADRIANMI.GOV  
 ADRIANCITY.COM

## APPLICATION FOR ZONING COMPLIANCE PERMIT

### JOB LOCATION

NAME OF OWNER / AGENT	IS THIS A NEW BUSINESS AT THIS LOCATION <div style="display: flex; justify-content: space-around;"> <span>YES</span> <span>NO</span> </div>
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STREET ADDRESS & JOB LOCATION	OWNERS TELEPHONE NUMBER <div style="display: flex; justify-content: space-around;"> <span>HOME</span> <span>OFFICE</span> </div>
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### CONTRACTOR / HOMEOWNER INFORMATION

CONTRACTOR HOMEOWNER	NAME (PRINT)
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ADDRESS (STREET # AND NAME)
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CITY	STATE	ZIP CODE
TELEPHONE NUMBER	SOCIAL SECURITY NUMBER	FEDERAL ID NUMBER (OR REASON FOR EXEMPTION)

WORKERS COMPENSATION INSURANCE CARRIER	MESC EMPLOYER NUMBER (OR REASON FOR EXEMPTION)
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### SITE CHANGE

PLEASE FILL OUT THIS SECTION IF YOU ARE RELOCATING OR EXPANDING AN EXISTING STRUCTURE OR CONSTRUCTING A NEW BUILDING, ACCESSORY BUILDING, ADDITION, DECK, SHED, FENCE OR PARKING LOT.

SELECT PROJECT TYPE: <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> ADDITION <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> DECK <input type="checkbox"/> FENCE <input type="checkbox"/> SHED <input type="checkbox"/> PARKING LOT <input type="checkbox"/> POOL	LOT SIZE(ACRES OR SQUARE FT): _____ NUMBER OF STRUCTURES EXISTING/TO REMAIN: _____ NUMBER OF NEW STRUCTURES PROPOSED: _____ <u>GROSS FLOOR AREA</u> SQUARE FOOTAGE OF EXISTING STRUCTURE(S): _____ SQUARE FOOTAGE OF PROPOSED STRUCTURE(S): _____	<u>PROPOSED SETBACKS(FT)</u> FRONT: _____ REAR: _____ RIGHT SIDE: _____ LEFT SIDE: _____
<u>PARKING SPACES(FOR COMMERCIAL PROJECTS)</u> NUMBER OF EXISTING SPACES: _____              NUMBER OF PROPOSED SPACES: _____              TOTAL NUMBER OF PARKING SPACES: _____		
IS THIS PROJECT IN THE HISTORIC DISTRICT? _____		

ESTIMATED TOTAL CONSTRUCTION COSTS: \$ \_\_\_\_\_

PLEASE EXPLAIN YOU REQUEST IN DETAIL (2-3 SENTENCES):

*ALONG WITH THIS APPLICATION, PLEASE PROVIDE A SITE PLAN THAT SHOWS EXISTING STRUCTURES AND PROPOSED CHANGES.  
ANY SITE INSPECTION PRIOR TO PERMIT ISSUANCE WILL REQUIRE ADDITIONAL FEE.*

### CHANGE OF USE

PLEASE FILL OUT THIS SECTION IF YOU ARE STARTING A BUSINESS OR MOVING YOUR BUSINESS INTO AN EXISTING NON-RESIDENTIAL RETAIL/OFFICE SPACE.

NAME OF BUSINESS:

BUSINESS TYPE:

PREVIOUS BUSINESS TYPE AT THAT ADDRESS:

APPLICANT

*I HEREBY CERTIFY THE ABOVE WORK DESCRIBED ON THIS PERMIT APPLICATION SHALL BE INSTALLED IN ACCORDANCE WITH SECTIONS 2.1, 4.36 AND 4.41C OF THE CITY OF ADRIAN ZONING ORDINANCE AND SHALL BE INSTALLED IN ACCORDANCE WITH THE APPROVED DRAWINGS. I FURTHER UNDERSTAND THAT IT IS MY RESPONSIBILITY TO NOTIFY THE INSPECTION DIVISION UPON COMPLETION/INSTALLATION OF THE ABOVE WORK.*

SIGNATURE OF APPLICANT \_\_\_\_\_ APPLICATION DATE \_\_\_\_\_

FEE SCHEDULE: \$50.00