

Howard Township – Cass County, Michigan  
Zoning Compliance Application

Indicate Which One You Are Applying For (Application must be complete and signed – please print)

\_\_\_\_ New House    \_\_\_\_ Addition    \_\_\_\_ Fence    \_\_\_\_ Accessory Bldg.    \_\_\_\_ Home Occupation    \_\_\_\_ Adult Foster Care

\_\_\_\_ Hardship Trailer    \_\_\_\_ Other, please describe \_\_\_\_\_  
=====

Property Owner(s) as Listed on Tax Statement \_\_\_\_\_

Property Site Address \_\_\_\_\_  
(if a new address is needed, please state that above)

Property Parcel Number \_\_\_\_\_

Zoning District (if known-circle one):    AR    R-1    R-2    R-3    R-4    C-1    M    L-1

Property Owner(s) Phone and/or Cell Number \_\_\_\_\_

**I hereby certify the information given is correct to the best of my knowledge and agree to abide with the Howard Township Building Codes and other applicable Ordinances of Howard Township.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Signature \_\_\_\_\_

**If signature is an agent for the owner, provide agent phone number** \_\_\_\_\_  
(may not have an agent if application is for home occupation or adult foster care)

**Note:** You will be contacted with your approval or denial. Upon approval you may contact the Building Official (business hours: Wednesdays, 9:00 am – Noon) to obtain a building permit. Upon approval of a home occupation or adult foster care facility a copy of the approval will be sent to you.

**\$25.00 Fee for Hardship Trailer    \$20.00 Fee for All Others    Fees are Non Refundable**  
**Must complete page 2 (sketch plan) with all applications but Home Occupation and Adult Foster Care**  
**Home Occupation must complete page 3                      Adult Foster Care must complete page 4**

Office Use Only

Amount paid \_\_\_\_\_ by: cash \_\_\_\_\_ check # \_\_\_\_\_ Date \_\_\_\_\_ Staff Initials \_\_\_\_\_

Zoning Administrator use:

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Building Permit Required: \_\_\_\_\_ yes \_\_\_\_\_ no

ZA Signature \_\_\_\_\_ Date \_\_\_\_\_

ZA Printed Name \_\_\_\_\_

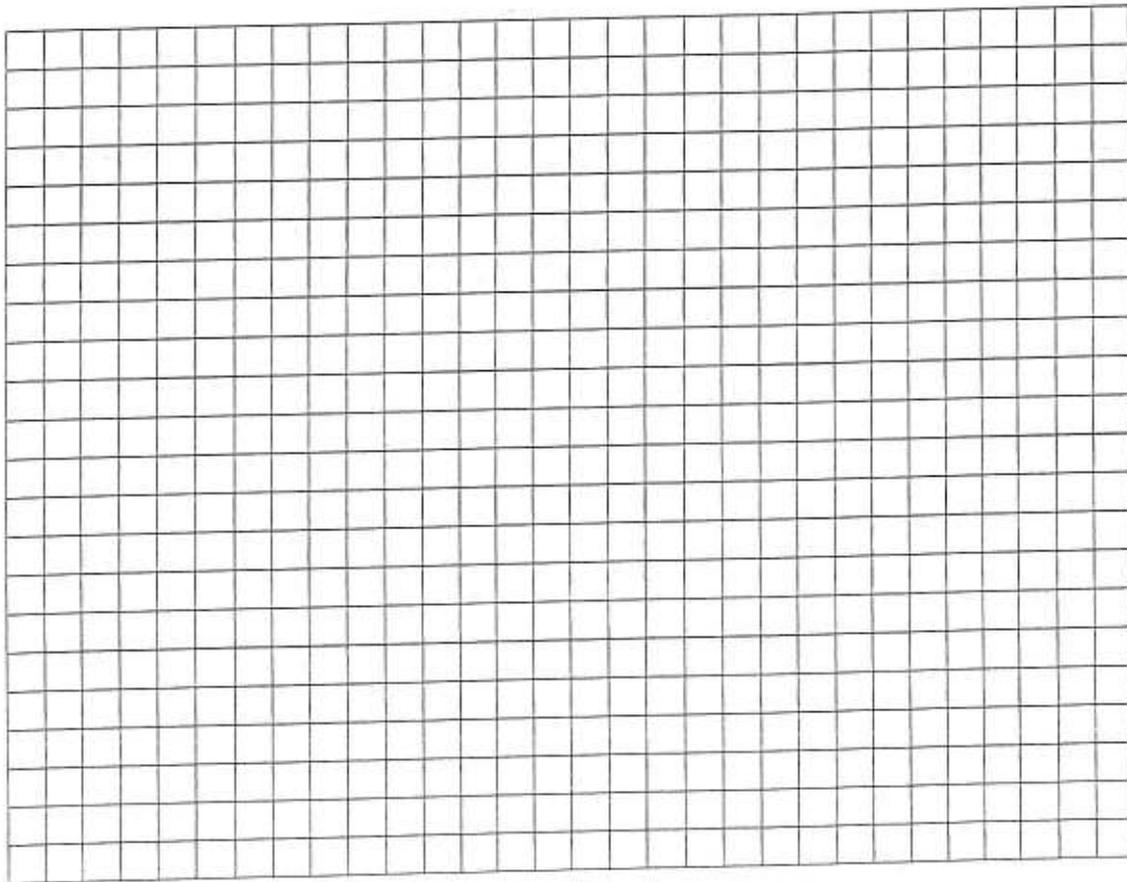
Comments (if any): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Howard Township – Cass County, Michigan  
Zoning Compliance Application Sketch Plan

Building/Addition Dimensions are: \_\_\_\_\_ Height is: \_\_\_\_\_

Draw a sketch plan in the graph below, provide the following information:  
(sketch plan need not be to scale)

1. Show dimensions of the lot size (graph may not resemble your property shape)
2. Draw location of **ALL** existing and proposed structures
3. List dimensions of **ALL** existing and proposed structures
4. Show distances between **ALL** existing structures and proposed structures
5. Show distances between **ALL** structures and **ALL** property lines
6. Show location and names of **ALL** roads and/or easements bordering property.



Form Zoning Application Cass County Michigan