



Village of Mayville
 6043 Fulton Street
 PO Box 219
 Mayville, MI 48744
 989.843.6423 phone
 989.843.0123 fax
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VILLAGE OF MAYVILLE ZONING PERMIT APPLICATION

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Contractor's Name: _____

Contractor's Phone: _____

Tax Roll Number of Parcels: _____

Current Zoning Classification of Parcels: _____

The existing use of the site: _____

The proposed use of the site: _____

Number of existing or proposed: Bedrooms: _____ Dwelling Units: _____

Employees: _____ Customers: _____

Plot Plan Attached Yes: _____ No: _____

(To include location, shape, and dimensions of parcel; location of easements; centerline of road; location dimensions and height of existing and proposed buildings; existing and proposed front, side and rear yard setbacks)

Attached is a list of the uses permitted in this zoning district.

PERMIT APPROVED

PERMIT DENIED FORWARD TO:

VARIANCE NEEDED

PLANNING COMMISSION

COUNTY BUILDING CODES

ZONING BOARD OF APPEALS

 Village Zoning Administrator

The applicant's and village's copy of this application will include a copy of the plot plan and a list of uses permitted in that district.

Remarks: _____

CASH AMOUNT: _____

CHECK # _____ AMOUNT: _____ DATE _____