

WHITEHALL TOWNSHIP – APPLICATION FOR DEMOLITION PERMIT

1. State the names of all owners of the land for which a demolition permit is requested:

A. Applicant's Name and Title: _____

2. Address of Owners: _____

3. Phone number and email of applicant: _____

4. Fax number (if any) of applicant: _____

5. Tax ID # of parcel: _____

6. Address of parcel (if different than #2): _____

7. Legal Description: ***Attach to this permit application the legal description of the parcel.***
You may satisfy this provision by attaching a copy of your tax bill, deed or land contract. Have you attached such document? ___ Yes ___ No

8. In acres or square feet (as applicable) state the area of the parcel: _____

9. Parcel frontage/width in feet: _____

10. Parcel depth in feet: _____

11. Describe the structure or building that is proposed to be demolished: _____

12. Describe any other buildings or structures located on the parcel: _____

13. State the company/contractor to do the demolition: _____

14. Do you intend to excavate or engage in any demolition within:

a. A designated flood plain? _____ Yes _____ No

b. A designated wetland? _____ Yes _____ No

c. Within 500 feet of any lake, river or stream? _____ Yes _____ No

If the answer is yes, then the Township cannot grant you a demolition permit until you have approval from the proper State department. For a designated flood plain or wetland contact the

DEQ at 616-356-0500. For soil erosion (within 500 feet of any lake, river or stream) contact the Muskegon County Department of Public Works at 231-724-6411.

15. Checklist: ***Has the Applicant submitted with this application the following:***

a. Payment of the Demolition permit fee (check made payable to Whitehall Township)?
 Yes No

b. A site plan signed and dated by the applicant, consistent with the Township Zoning Ordinance (showing the location of abutting streets, the location of all existing and proposed to be demolished structures)? Yes No

c. A legal description of the parcel (see #7 above)? Yes No

16. Additional Statements. If there is any additional information that the applicant believes is important, set forth the information on an additional sheet and attach it to this application.

Signature of Applicant:

Print Name: _____

Date: _____

PERMIT

The foregoing application is approved. This permit becomes null and void if demolition work is not started within six (6) months of date of issue.

Approved.

Zoning Administrator

Date: _____

Zoned: _____