

CITY OF HARPER WOODS BUILDING DEPARTMENT ZONING PERMIT APPLICATION RESIDENTIAL **19617 HARPER AVE, HARPER** WOODS, MI 48225 PH: (313) 343-2526

FOR OFFICE USE ONLY	***
PERMIT #:	
DATE ISSUED:	
ISSUED BY:	

PROJECT INFORMATION					
Job Address:	· · · · · · · · · · · · · · · · · · ·	Unit #:	Zoning District:		
BUILDING TYPE	iy				
ZONING PERMIT REQUEST FOR: <u>CONCRETE</u>					
🛛 Sidewalk 🗆 Driveway	/ 🗖 Approach 🗍 Patio	Other			
FENCE (To remove exist	ing Fence notarized letters f	rom adjacent nelg	hbors are required)		
🛛 Wood/Vinyl 🔲 Chai	n link	Height:			
ACCESSORY STRUCTURE					
🗇 Shed (Max 200 Square	Feet-single story-must comp	ly with setbacks)	Other		
Size (Sq.Ft.):					
Describe work in detail:					
ESTIMATED COST OF CONSTRUCTION	<u>\$</u> By Applicant		\$ By Department		
Applicant Information	· · · ·				
Name:	Phone		Fax:		
Address:					
License #					
	Preferred Contact # /Name:				
		owner is same as			
Owner Information					
Name:		Phone:		Fax:	
Address:					
SHOW ON A SCALED DRAWING, N					

LOCATION OF THE PROPOSED PROJECT. INDICATE THE DISTANCE OF THE PROJECT FROM PROPERTY LINES, BUILDINGS, ALONG WITH THE PROJECT DIMENSIONS; HEIGHT, WIDTH AND LENGTH.

I, CERTIFY THAT THE INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT AND THAT I HAVE REVIEWED ALL DEED RESTRICTIONS WHICH MAY APPLY TO THIS CONSTRUCTION AND AM AWARE OF MY RESPONSIBILITY THEREUNDER.

Applicant's Signature: _____ DATE: _____