APPLICATION FOR SITE PLAN REVIEW

SHORT TERM RENTAL	TOURIST HOME	BED & BREAKFAST
(Mark above what is being applied for)		
Almira Township		Application No
7276 Ole White Drive		Fee:
Lake Ann, MI 49650		Received:
(231)275-5862		
Applicant	Agent	
Name:	Name:	
Address:		s:
City:		
State & Zip:		د Zip:
Phone: ()	Phone:	<u>()</u>
Property Parcel # 10-01		
Property Address:		

Note: Under Section 7 – Site Plan Review, conditions may be required by the Planning Commission.

**Before a permit may be issued, ALL of the following documentation must be submitted or justified as non-applicable. Please indicate by checkmark that each item has been enclosed with the application.

Check if Provided:

1. Confirmation that Association By-Laws or Deed Restrictions do not prohibit Short Term Rental.

_____ 2. Proof of ownership, survey and/or legal description.

______3. Zoning Classification of the subject parcel and adjoining parcels.

______ 4. Most recent pumping record for the septic system or a current evaluation by the Benzie/Leelanau District Health Department and most recent domestic water quality report.

_____ 5. Total number of bedrooms to be used: (enter # here) ______

_____6. Total number of allowed guests _____

7. A	site plan	showing	existing	structures,	setbacks.	off street	parking.	. driveway	s within	100 feet.

______8. Refuse container(s) location shown and the name of licensed waste hauler under contract.

9. Name of property manager and twenty-four (24) hour contact phone number when actively rented. (see agent info.)

_____ 10. Are boats allowed with this rental? Yes _____ No _____ Linear feet of shore line _____

I hereby depose and say, under the penalties of perjury, that all of the statements and/or information contained herein or submitted with this application are true. If any statements and/or information are found at a later date to be false, this permit shall become null and void. I understand that this approval expires on December 31 of each year and that renewal applications will be considered beginning October 1 of each year. I understand that change of property ownership voids Short Term Rental, Tourist Home, Bed & Breakfast. I understand that I must meet all applicable Federal, and State code requirements including Almira Township Ordinances.

Applicant Signature: _____ Date: _____

Township Action: Approved:	Denied:	Date:
Planning Commission:	Zoning Ac	lministrator:

Special Restrictions or Conditions: _____