

Application - Zoning Permit

City of Greenville - Building Department
411 South Lafayette Street Greenville, MI 48838



IV. IDENTIFICATION: To be completed by all applicants

	Mailing Address - Number, Street, City, & State	Zip Code	Telephone No.
1. Name of Owner or Leasee:			
2. Name of Contractor:			

I hereby certify that the proposed work is authorized by the owner of record and make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of Applicant:	Address:	Application Date:

You must submit your Zoning Approval to Imperial Municipal Services to receive a Building Permit.

DO NOT WRITE BELOW THIS

Zoning Approved for use applied for when signed

Approved By: _____ Signature of Zoning Administrator

Or Authorized Zoning Assistant when applicable

Approved By: _____ Signature of Authorized Zoning Assistant

Comments:

Proof of ownership has been verified.