

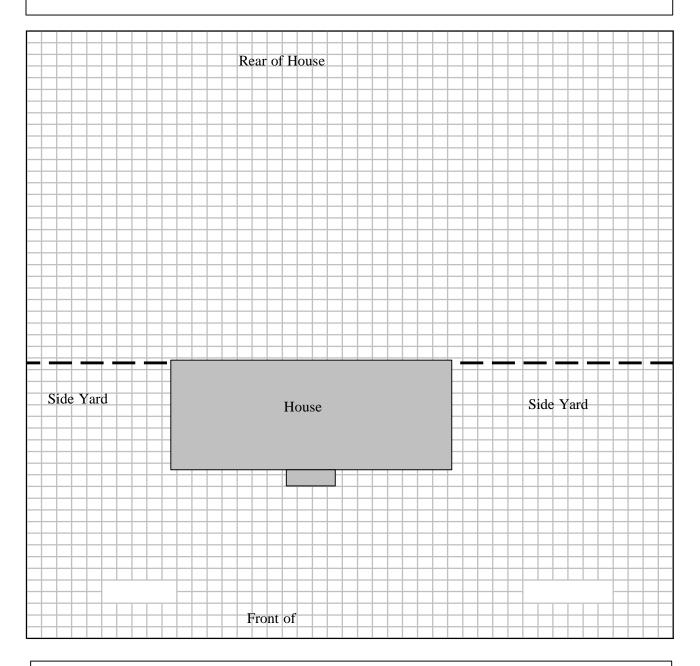
Shed Permit Application

323 W. Michigan Ave. Marshall, Michigan 49068 Telephone (269) 781-3985 Fax (269) 789-4628

Date of Application			Permit #		
1. Job Location					
Property Owner					
Street Address & Job Location (Street No. and Na	me)				
2. Contractor Information					
Name of Owner or Company		Email Address	Email Address		
Address (Street No. and Name)	City	Sta	ate	Zip Code	
Cell Phone Number	Fax Phone number	Pho	Phone number with Area Code		
Signature			Date		
Signatur			Date		
	Department	t Use Only:			
Approved	Reason for Denial:				
Denied					
Examiners Signature			Date		

Disclaimer: Approval of this permit is for zoning compliance only. The property owner is solely responsible for making sure that the shed is installed in accordance with the zoning ordinance and located on their own property. If you do not know where the property lines are then a State of Michigan licensed surveyor should be contacted to locate them.

NO WORK SHALL BE STARTED NOR SHALL ANY PERMIT BE ISSUED UNTIL ALL REQUIRED FEES HAVE BEEN PAID IN FULL, AND THOSE DEPARTMENTS AFFECTED BY THE PROPOSED WORK HAVE APPROVED THE WORK BEING DONE.



IF YOU HAVE ANY QUESTION OR ARE A CORNER LOT, PLEASE CALL THE ZONING ADMINISTRATOR AT (269) 781-3985. FEE IS \$20.00.