CHEBOYGAN COUNTY
PLANNING & ZONING DEPARTMENT

870 S. MAIN ST., RM. 103 ▪ PO BOX 70 ▪ CHEBOYGAN, MI 49721 ▪ PHONE: (231)627-8489 ▪ FAX: (231)627-3646

Date Received	Zoning Permit Application Fee:	Payment Type:	Approved By:	Date Approved:

▪ MAKE CHECK PAYABLE TO: **PLANNING & ZONING DEPARTMENT** ▪ OWNER'S SIGNATURE & APPLICANT'S SIGNATURE ARE REQUIRED ON APPLICATION ▪

JOB LOCATION

Address	Parcel ID #	Zoning District
	16 - _____ - _____ - _____ - _____ - _____	

Township	Section	Subdivision/Condo Name	Lot #:	Distance to nearest lake, stream, river or body of water:

APPLICANT INFORMATION

☐ Property Owner ☐ Purchaser – Option or Purchase Agreement ☐ Purchaser – Land Contract

Date deed will be recorded with Register of Deeds _____ **Please attach a copy of the land contract**

☐ Tenant ☐ Developer / Contractor ☐ Engineer / Architect

Name/Company	Telephone	**Cell**

Address	City & State & Zip	Email

AFFIDAVIT

I agree the statements made in this application are true, and if found not to be true or incomplete, any zoning permit that may be issued may be void. I agree to comply with the conditions and regulations provided with any permit that may be issued. I agree the permit that may be issued is with the understanding all applicable sections of the Cheboygan County Zoning Ordinance will be complied with. I agree to notify Cheboygan County Planning & Zoning Dept. for inspection before the start of construction and when locations of proposed structure(s) are marked on the ground.

Applicant's Signature _____ Print Name _____ Date _____

OWNER INFORMATION

Name	Telephone	Cell

Address	City, State & Zip	E-mail

AFFIDAVIT

I hereby certify that I am the owner of the above described property and that the information provided herein is true and correct. In lieu of representing this request myself as owner of the subject property, I hereby authorize the person designated above as applicant to represent this request on my behalf. I hereby give permission for Cheboygan County Planning & Zoning Department Staff to enter the property subject to this permit application for purposes of inspection.

Owner's Signature _____ Print Name _____ Date _____

EXISTING USE OF PROPERTY

Provide detailed list of all existing uses for this property (i.e. dwelling, residential storage, agriculture, home occupation, commercial storage, commercial, etc.). If more space is needed, please attach additional pages.

PROPOSED BUILDING INFO

Number of Stories	
Overall Height:	
Overall Width:	
Overall Length:	

PERMIT REQUEST

Provide a detailed description of your request (proposed building and/or proposed use). If more space is required, please attach additional pages.

PROPOSED SETBACKS

Front Setback:	
Rear Setback	
Side Setback:	
Side Setback:	

PROPOSED **BUILDING DIMENSIONS**		
	DIMENSIONS OF PROPOSED STRUCTURE(S)	**SQUARE FOOTAGE OF PROPOSED STRUCTURE(S)**
1st Floor:		
2nd Floor:		
Garage/Storage Building (1st floor):		
Garage/Storage Building (2nd floor):		
Mobile Home (*Year of Mobile Home:_____):*		
Porch/Deck: *Covered:* ☐ *Yes* ☐ *No*		
Porch/Deck: *Covered:* ☐ *Yes* ☐ *No*		
Porch/Deck: *Covered:* ☐ *Yes* ☐ *No*		
Other:_____		
Total Square Footage Of Proposed Structures:		0

PLOT PLAN

Draw a plot plan below using a straight edge or a ruler. Please include items 1-10 (if applicable) on the plot plan.

1. Property shape & property line dimensions.
2. Place north arrow on plot plan.
3. Location, shape & size of all existing & proposed buildings on property.
4. Location of all drives & parking areas.
5. Rivers, lakes, wetlands, or streams within 500 ft.
6. Front, rear, & side setback dimensions
7. The existing & intended use of the lot & structures.
8. Parcels under separate ownership therein.
9. Road Right-Of-Way (ROW); access or utility easements.
10. Other essential zoning information.

CHEBOYGAN COUNTY PLANNING & ZONING DEPARTMENT

FEE SCHEDULE – REVISED JANUARY 1, 2026

ZONING APPLICATIONS	
Category	**Fee**
Zoning (*includes home occupations, residential change of use, revise zoning permit & 1 year zoning permit renewal - $60.00*)	.11¢ per square foot (or $60.00 whichever is greater)
Sign	$60.00 / No charge for a nameplate
Change Roof Elevation	$5.00
Fence	$35.00
Commercial Farms and Commercial Farm Buildings	No Charge
Cell Tower Upgrade	$150.00
Level 1 SES-PV - Solar Building Mounted	.10¢ per square foot (or $60.00 whichever is greater)

Plot Plan - Sample

