

**APPLICATION FOR ZONING PERMIT**

(Expires 1 year from date of issuance.)

St James Township  
Charlevoix County, Michigan

(Please print clearly or type  
all information.)

FEE AMOUNT: \$ - (See Attached Schedule)

Check # -

(Make check payable to appropriate township.)

**I. Identification - Complete the following:**

- A. Property Owner(s) Hodgson Financial Enterprises Inc  
Address Box 237  
Zip Code 49782 Phone (231) 409 - 6034
- B. Applicant, if other than property owner McDonough Construction  
Address Box 354  
Zip Code 49782 Phone (231) 448 - 3038
- C. Legal description of property for which Zoning Permit is being requested, (attach separate sheet, if necessary): See attached  
Street address of property (required) NO STREET ADDRESS  
Property tax ID no. 15 - 93 - 575 - 001 - 90  
Zoning District in which property is located H (Ex: R-1, R-2, A, H, etc.)  
Are there any dedicated rights-of-way or easements which abut or traverse part or all of the subject property? \_\_\_\_\_

(If yes, illustrate locations on sketch plan.)

**D. Furnish evidence of the following:**

- Driveway/Road Permit, obtained from the Charlevoix County Road Commission.
- Property address, obtained from the Charlevoix Co. Equalization Dept.
- Proof of ownership of the property on which use will occur.
- Health Dept. approval/permit for on-site septic system or hook-up to sewer system.
- Soil and Erosion permit, (if the site is within 500 feet of a lake or stream.)
- Other information with respect to the proposed structure, use, lot, and adjoining property as may be required by the Zoning Administrator.

**II. General information - Complete the following:**

- A. Lot dimensions X; Total square feet or acres \_\_\_\_\_
- B. Exterior dimensions of proposed structure X; Height \_\_\_\_\_ ft.
- C. Proposed use:
- |   |  |
|---|--|
| Residential   | Non-Residential                                      |
| ( ) One Family  | ( <u>X</u> ) Commercial <u>DEMO</u><br>specify _____ |
| ( ) Two or more family<br>Number of units _____       | ( ) Industrial<br>specify _____                      |
| ( ) Transient hotel or motel<br>Number of units _____ | ( ) Other<br>specify _____                           |
| ( ) Mobile Home                                       |  |
| ( ) Accessory building<br>specify _____               |  |
| ( ) Other (Specify) _____                             |  |

General Information (continued)

- F. Type of improvement: (check as many as appropriate)
- |   |  |
|---|--|
| <input type="checkbox"/> New Building   | <input type="checkbox"/> Repair, replacement |
| <input type="checkbox"/> Addition   | <input checked="" type="checkbox"/> Wrecking |
| <input type="checkbox"/> Alteration   | <input type="checkbox"/> Moving, relocation  |
| <input type="checkbox"/> Earth change involving land within 500 feet of a lake or stream; |  |
| Number of feet to the water _____   |  |
| Body of water involved _____  |  |

G. Names of Contractors involved in the project: ..

McDonough Construction

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

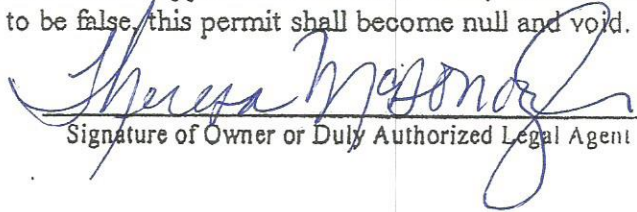
\_\_\_\_\_

\_\_\_\_\_

III. Complete a sketch (see page 3) or separate site plan, which MUST include:

- A. Any existing structure(s) including location and exterior dimensions.
- B. Proposed structure(s) including location and exterior dimensions.
- C. Location of existing or proposed well and septic system.
- D. Location of any public roads or rights-of-way and/or any easements which abut or traverse all or any part of this property.
- E. Location of shore line if this site is within 500 feet of a lake or stream.
- F. Location of structures on abutting lots that are within 10 feet of the property lines.
- G. Depths of all yards; front, back, and side yards (distances from the building lines, including decks, porches, etc., to property boundaries.)
- H. Other details as may be required by the Zoning Administrator.

I hereby depose and say, under the penalties of perjury, that all the statements and information contained herein or submitted with this application are true. If any statements or information are found at a later date to be false, this permit shall become null and void.

  
Signature of Owner or Duly Authorized Legal Agent

## Viewing Parcel Number: 013-575-001-90

## Parcel Details

<b>Assessing City/Township:</b>	St. James Township
<b>Property Address:</b>	26251 MAIN ST BEAVER ISLAND, MI 49782
<b>Owner Information:</b>	HODGSON FINANCIAL ENTERPRISES INC PO BOX 237 BEAVER ISLAND, MI 49782
<b>Property Class:</b>	201 - Commercial - Improved
<b>School District:</b>	15010 - Beaver Island
<b>P.R.E. Percentage:</b>	0%
<b>Current SEV:</b>	\$51,000
<b>Current Taxable Value:</b>	\$47,098
<b>Prior Year SEV:</b>	\$50,300
<b>Prior Year Taxable Value:</b>	\$46,220

## Sales Information

Date	Document Type	Liber/Page	Sales Price
06/05/2008	QC	852/666	\$0
01/01/2003	WD	372/934	\$0
01/01/2002	WD	372/934	\$0
01/01/1998	WD	372/934	\$0

## Tax Description

COM AT SE COR OF LOT 1 BLK A FRAZER, YERKES & CLAYTON'S SUBD OF GOV LOT 1&2 SEC 27-39-10 TH N46DEG22'51"E AL NWLY LIOF MAIN ST 149.38FT TO POB TH N47DEG30' 48"W 136.12FT TH N43DE4G47'38"E 58.87FT TH S47DEG30'047"E 138.78FT TO PT ON NWLY LI MAIN ST TH S46DEG22'51"W 58.96FT TO POB BEING PT OF LOT 1 BLK A FRAZER, YERKES & CLAYTON'S SUBD OF GOV LOTS 1&2 SEC 27-39-10 CONT 0.186A





Data Search



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