

ESTABLISHED 1835



Zoning Compliance Certificate

Low Density Residential District (LR)

- 18027 Old US 12 • Chelsea, MI 48118 • (734)475-8890 • FAX (734)475-8905
- www.sylvan-township.org

Staff Use Only		Property Address:			
Fee:		Zoning Permit Number:		Application Date:	
A. Property Details		Zoning District: LR			
Allowed		Existing		Proposed	
Lot Area	1 Acres	Lot Area		Lot Area	
Lot Width	150 feet	Lot Width		Lot Width	
Setbacks					
Front Yard*	50 feet	Front Yard		Front Yard	
_____ Side Yard	20 feet	_____ Side Yard		_____ Side Yard	
_____ Side Yard	20 feet	_____ Side Yard		_____ Side Yard	
Rear Yard	35 feet	Rear Yard		Rear Yard	
Lot Coverage	20%	Lot Coverage		Lot Coverage	
Floor Area Ratio	20%	Floor Area Ratio		Floor Area Ratio	
Maximum Height	35 feet	Maximum Height		Maximum Height	
Number of Stories	2 Stories	Number of Stories		Number of Stories	
Max. Height of Detached Build	25 Feet	Max. Height of Detached Build		Max. Height of Detached Build	

*** The front yard on Lake Property is lakeside**

Sec. 30-36(l)

An application for a certificate of zoning compliance for a parcel of land in the LR district shall be accompanied by a staked survey of the land for which the certificate is requested. The survey shall be signed and sealed by a land surveyor registered in the state.

Sec. 30-38(h)

Certificate of footings. Any construction in the LR district for which a certificate of zoning compliance has been issued shall have the location of footings or any other sub-grade or at-grade improvement, such as slabs, certified for compliance with all setback requirements. Certification shall be made by a land surveyor registered in the state. The owner of the property shall provide the certification to the zoning inspector within ten days of the installation of footings or other sub-grade or at-grade improvement. Failure to comply with this requirement shall render the certificate of zoning compliance null and void. All construction shall cease immediately if the footings or other construction violates the setback requirement and shall not be re-commenced until after the violation is red.

PROPERTY OWNER SIGNATURE: _____ DATE: ____/____/____

C. Action of the Inspector	
Variance Required:	Yes _____ No _____
Zoning Compliance Certificate Approved:	Yes _____ No _____
Reason: _____	

Zoning Administrator _____	Date ____/____/____