

Village of Saranac

10 North Bridge Saranac MI 48881
Phone: 616-642-6324 Fax: 616-642-0472

Home Occupation Application

Fee: 100.00

This application must be completed in full and approved by the Village Zoning Administrator or Planning Commission before beginning any business, construction, excavation or use regulated by the Village Zoning Ordinance. (Type 2 home occupations are approved by the Planning Commission.)

Proposed Business Type and Description

Property Information

Address _____

Parcel Number **34-021-**_____

Legal Description (may attach copy from survey or deed)

Applicant Information

Name _____

Address _____

City _____ State _____ Zip _____

Phone Numbers (____) _____ (____) _____ (____) _____

Property Owner Information (if different from applicant)

Name _____

Address _____

City _____ State _____ Zip _____

Phone Numbers (____) _____ (____) _____ (____) _____

Affidavit

I certify and affirm that I am either the tenant or the property or building owner and that I agree to conform to applicable zoning laws of the Village. I also certify and affirm that this application is accurate and complete to the best of my knowledge. I hereby give permission for Village representatives to visit this location. I have read and will abide by the home occupation regulations.

Applicant Signature _____ Date _____

Property Owner Signature _____ Date _____

Home Occupation Application (page 2)

Present Zoning District

Present Use of the Property

Site Plan

Include a site plan showing the dwelling and any existing buildings, structures or the proposed location of any new construction or additions. Show where off street parking and size will be located. Sketch your home floor plan and show square footage of area devoted to the home occupation. Signs must meet the requirements of section 15.18.28.

Employees

Number of people working at the home occupation living at the home _____

Number of people working at the home occupation but not living at the home _____ (maximum 3)

Zoning Administrator Use Below This Line

Received date _____

Type 1 Home Occupation _____ (or) Type 2 Home Occupation (Special Use Permit) _____

Application Approved _____ Date _____ Public Hearing Date _____

Conditions of Approval _____

Application Denied _____ Date _____

Reason for Denial _____

Type 1: Zoning Administrator Signature _____ Date _____

Type 2: Planning Commission Chairman Signature _____ Date _____