



1. INTRODUCTORY MEETING WITH PLANNING STAFF - Staff will assist the applicant by explaining the review process, review the zoning requirements, and provide site information, review the application and site plan requirements.
2. SUBMISSION OF APPLICATION - Applicant will submit application to the Zoning Administrator for review. **Fee must be received before any requests are processed.**
 - 2a. APPLICATION IS INCOMPLETE – Staff will prepare a notice of findings/corrections that will be sent to the applicant or review in person.
 - 2b. APPLICANT SUBMITS REVISIONS – Staff reviews for completeness.
3. ZONING ADMINISTRATOR APPROVAL - Staff will review request to determine if application is complete. If application is complete and the request meets the requirements of the Zoning Ordinance a permit will be issued.
4. STAFF ISSUES PERMIT – A copy of the permit is given to or mailed to the applicant.
5. APPLICANT OBTAINS A BUILDING PERMIT – Applicant applies for a building permit from the State Building Inspector if applicable.
6. SITE VISIT TO CLOSE OUT PERMIT – Staff will perform a site visit to determine if the construction has met the requirements of the ordinance. If there are no issues, the permit is then closed.



PLANNING & ZONING
9208 KAUKO STREET
KALEVA, MI 49645
231.362.3366 (phone)

**Application to Occupy a
Temporary Dwelling
Please Print**

Address:	Parcel # 51-	
Applicant Information		
Address:		
Phone:	Cell:	Email:
Address of Temporary Dwelling:		
Dates Occupied: From: ____/____/____ To: ____/____/____		
Type of Temporary Structure: ____ shed ____ RV ____ trailer or vehicle ____ other (specify:)		
Reasons for Temporary Dwelling:		
Do you have a building permit? ____ Yes ____ No		
Permit Number:		
Building Surveyor:		
List the type of facilities provided for sanitation, laundry and bathing:		
Is water provided to the site? ____ Yes ____ No ____ Village ____ Tank		
Is power provided to the site? ____ Yes ____ No		
Are you connected to Sewer? ____ Yes ____ No		
If No		
Is your septic tank system installed? ____ Yes ____ No		
When do you expect the permanent dwelling to be finished? ____/____/____		
PLEASE NOTE A PERMIT WILL NOT BE ISSUED FOR LONGER THAN SIX (6) MONTHS. Extended permit use requires Planning Commission Approval.		
Can you see the temporary dwelling from the street? ____ Yes ____ No		
Are there any objections from the neighbor/s? ____ Yes ____ No		
Please attach a list of Names and Addresses of neighbors that you have consulted with.		
Please attach a site plan of the location for the temporary dwelling.		

Authorization	
I verify that the information and statements made in this application are true and accurate, and understand if found not to be true, any permit that may be issued, may be revoked. Further, I agree that any permit that may be issued is with the understanding that I/we will comply with all applicable Sections of the Village of Kaleva Zoning Ordinance. Further, I understand that this is a permit application (not a permit) and that a Permit, if issued, conveys only use of the temporary dwelling. Further, I agree that if a Permit is issued, I give permission for officials from the State of Michigan, Manistee County and Village of Kaleva for the purposes of inspection.	
Signature: _____ Date: _____ (PLEASE MAKE ALL CHECKS PAYABLE TO THE VILLAGE OF KALEVA)	
Office Use Only	
Fee: Please Check the Village of Kaleva Fee Schedule to determine the cost of your project	
Zoning District: _____	Notes: _____
Approved: _____	Denied: _____ Reason(s) are attached.
Payment form _____	Check #: _____ Receipt #: _____
Signature: _____ Date: _____	

COPY PLANNING COMMISSION AND ZONING ADMINISTRATOR

For simple site plans this sheet is provide for convenience. Other site plans containing all required information may be submitted, including Superimposed Surveys, Superimposed Aerial Photos or drawings drawn to scale

SITE PLAN SCALE ¼ inch (one square) equals 5 feet																			
DRAW AN ARROW THAT INDICATES DIRECTION OF NORTH																			
Address of proposed Development:																			
Location of Temporary Dwelling:																			
Name of Preparer:																			
Address of Preparer:																			
Date:										Parcel Area:									

Checklist

Checklist: A temporary permit may be issued by the Zoning Administrator for a mobile home or other temporary dwelling such as an RV, camper or trailer to be occupied for a period up to six (6) months while a single-family dwelling is being constructed or remodeled. Such temporary permit may be extended by the Planning Commission for like periods of time, but not after the original cause of need for the use shall cease to exist. The Planning Commission shall require a cash deposit of not less than (\$1000) one thousand dollars, which shall be returned in its entirety once the temporary use has been removed from the premises, in accordance with the provisions of the temporary use permit. Such temporary permit may not be granted or extended beyond a maximum of two (2) years. The mobile home or temporary dwelling must be removed within sixty (60) days after the expiration of the permit or the deposit will be used for its removal.

	1. Name and address of the Property owner(s).
	2. Dates Occupied within 6 months.
	3. Location of temporary dwelling
	4. Reasons for Temporary Dwelling within Ordinance regulation.
	5. Sanitation, laundry and bathing facilities provided.
	6. Building permit or surveyor.
	7. Utilities provided.
	8. Expected date of permanent dwelling.
	10. Name and address of adjacent property owners contacted/provided
	11. Site Plan drawn with north point, existing structures, fences, natural features included.
	12. Any other information pertinent to approval.

WHEN COMPLETED SEND TO:

Village of Kaleva
9208 Kauko Street
P.O. Box 45
Kaleva, MI 49645

Phone (231) 362-3366

Email: villageofkaleva@yahoo.com