

# 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

**PROPERTY LOCATION**

Address <b>NA</b>	City / Village <b>Cheboygan</b>	Twp / Sec.	Zoning District
Property Tax I.D. Number <b>092-017-100-005-03</b>	Plat or Condo Name / Lot or Unit No.		

**APPLICANT**

Name <b>Sunrise Structures</b>	Telephone <b>989-766-2676</b>	Fax
Address <b>4369 Lake Augusta Hwy</b>	City, State & Zip <b>Hawks MI 49743</b>	E-Mail

**OWNER (If different from applicant)**

Name	Telephone	Fax
Address	City, State & Zip	E-Mail <b>Pfrance@AirSeaTravel.com</b>

**PROPOSED WORK**

<p>Type (check all that apply)</p> <p><input type="checkbox"/> New Building      <input type="checkbox"/> Reconstruction</p> <p><input type="checkbox"/> Addition            <input type="checkbox"/> Relocated Building</p> <p><input checked="" type="checkbox"/> Change in Use or Additional Use      <input type="checkbox"/> Sign, Type: _____</p> <p><input checked="" type="checkbox"/> Other: <b>display sheds</b></p>	<p>Building/Sign Information</p> <p>Overall Length: _____ feet</p> <p>Overall Width: _____ feet</p> <p>Floor Area: _____ sq. feet</p> <p>Overall Building Height: _____ feet</p> <p>Sign Area: _____ sq. feet</p> <p>Sign Height _____ feet</p>
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**PROPOSED USE (check all that apply)**

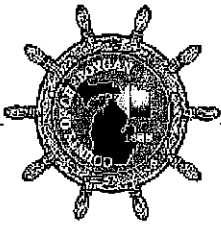
<input type="checkbox"/> Single-Family Residence	<input type="checkbox"/> Expansion / Addition	<input type="checkbox"/> Office	<input type="checkbox"/> Agricultural
<input type="checkbox"/> Duplex	<input type="checkbox"/> Garage or Accessory	<input type="checkbox"/> Commercial	<input type="checkbox"/> Institutional
<input type="checkbox"/> Multi-Family, # of units _____	<input type="checkbox"/> Storage	<input type="checkbox"/> Industrial	<input type="checkbox"/> Utility
<input checked="" type="checkbox"/> Other: <b>display sheds</b>			

Has there been a Site Plan or Special Use Permit approved for this parcel before?  YES  NO

If YES, date of approval: \_\_\_\_\_ Approved Use: \_\_\_\_\_

Directions to site: **M-27 M33 Junction**

**SITE PLAN REVIEW APPLICATION**



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1. Describe all anticipated activities (e.g. type of business, hours of operation, number of employees, etc). Attach additional sheets if needed.

display lot for Sunrise Structures  
like sheds, gazebos, live stock shelters, small cabins  
up to 15' portable sheds

2. Site Plan Standards.

### PLEASE EXPLAIN HOW YOUR REQUEST MEETS EACH OF THE FOLLOWING STANDARDS

- a. The site plan shall be designed so that there is a limited amount of change in the overall natural contours of the site and shall minimize reshaping in favor of designing the project to respect existing features of the site in relation to topography, the size and type of the lot, the character of adjoining property and the type and size of buildings. The site shall be developed so as not to impede the normal and orderly development or improvement of surrounding property for uses permitted in this Ordinance.

ONLY display sheds, and small buildings (portable)  
will be set there.

- b. The landscape shall be preserved in its natural state, insofar as practical, by minimizing tree and soil removal, and by topographic modifications which result in smooth natural appearing slopes as opposed to abrupt changes in grade between the project and adjacent areas.

Wont be doing any changes on landscape

- c. Special attention shall be given to proper site drainage so that removal of storm waters will not adversely affect neighboring properties.

Wont change anything on drainage

- d. The site plan shall provide reasonable, visual and sound privacy for all dwelling units located therein. Fences, walls, barriers and landscaping shall be used, as appropriate, for the protection and enhancement of property and for the privacy of its occupants.

display Barns not to be occupied.

- e. All buildings or groups of buildings should be so arranged as to permit emergency vehicle access by some practical means.

yes we can do that

- f. Every structure or dwelling unit shall have access to a public street, walkway or other area dedicated to common use.

no permanent buildings, only one driveway

- g. For subdivision plats and subdivision condominiums, there shall be a pedestrian circulation system as approved by the Planning Commission.

not applicable

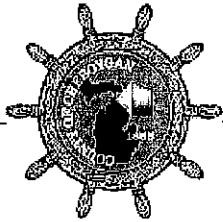
- h. Exterior lighting shall be arranged as follows:

i. It is deflected away from adjacent properties. NO lighting

ii. It does not impede the vision of traffic along adjacent streets. NO lighting

iii. It does not unnecessarily illuminate night skies. NO lighting

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SITE PLAN REVIEW APPLICATION

- i. The arrangement of public or common ways for vehicular and pedestrian circulation shall respect the pattern of existing or planned streets and pedestrian or bicycle pathways in the area. Streets and drives which are part of an existing or planned street pattern which serves adjacent development shall be of a width appropriate to the traffic volume they will carry and shall have a dedicated right-of-way equal to that specified in the Master Plan.

yes

- j. Site plans shall conform to all applicable requirements of state and federal statutes and the Cheboygan County Master Plan, and approval may be conditioned on the applicant receiving necessary state and federal permits.

yes

3. Size of property in sq. ft. or acres: 2.4

4. Present use of property: Vacant / Selling Sheds

5. Does the proposed use of the property include or involve either:

- Junk or salvage yard (Section 3.6)  YES  NO
- Mineral extraction (Section 17.17)  YES  NO

*If YES, this application must include a written plan as described in the Zoning Ordinance.*

6. Attach a copy of Warranty Deed or other proof of ownership.

7. Attach a copy of certified Property Survey or dimensioned property land plat.

NO Survey

### AFFIDAVIT

The undersigned affirms that the information and plans submitted in this application are true and correct to the best of the undersigned's knowledge.

Applicant's Signature Mark [Signature] Date 1-22-19

Does the property owner give permission for County zoning officials to enter his or her property for inspection purposes?

Yes  No

Owner's Signature [Signature] Date 1-22-19

# SITE PLAN REVIEW APPLICATION

## SITE PLAN REQUIREMENT CHECKLIST

(TO BE SUBMITTED WITH APPLICATION AND SITE PLAN)

ALL ITEMS LISTED BELOW MUST BE SUBMITTED IN ORDER FOR THIS APPLICATION TO BE DEEMED COMPLETE. INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED OR PROCESSED. EACH SITE PLAN SHALL DEPICT THE ITEMS LISTED BELOW, EXCEPT FOR THOSE ITEMS DETERMINED DURING THE PRE-APPLICATION CONFERENCE TO NOT BE APPLICABLE.

PLACE A CHECK MARK NEXT TO EACH REQUIREMENT TO SHOW THAT THE INFORMATION HAS BEEN SUPPLIED OR THAT A WAIVER IS BEING REQUESTED. IF A WAIVER IS BEING REQUESTED PLEASE NOTE ON THE NEXT PAGE THE REASON FOR THE WAIVER. SIGN AND DATE THIS CHECKLIST WHEN ALL ITEMS HAVE BEEN COMPLETED. PLEASE SUBMIT THIS CHECKLIST WITH YOUR APPLICATION.

INFORMATION SUPPLIED	WAIVER REQUESTED	REQUIREMENT
✓		a. North arrow, scale and date of original submittal and last revision. Site plan is to be drawn at a scale of 1 inch = 100 ft. or less.
	NA	b. Seal of the registered engineer, architect, landscape architect, surveyor, planner, or other site plan preparer. Location of proposed and/or existing property lines, dimensions, legal descriptions, setback lines and monument locations.
✓		c. Location of existing and proposed public roads, rights-of-way and private easements of record and abutting streets.
Level Sight	✓	d. Topography at maximum five foot intervals or appropriate topographic elevations to accurately represent existing and proposed grades and drainage flows.
	NA	e. Location and elevations of existing water courses and water bodies, including county drains and man-made surface drainage ways, stormwater controls, flood plains, and wetlands.
	NA	f. Location of existing and proposed buildings and intended uses thereof.
✓		g. Details of entryway and sign locations should be separately depicted with an elevation view.
	NA	h. Location, design, and dimensions of existing and/or proposed curbing, barrier free access, carports, parking areas (including indication of all spaces and method of surfacing), fire lanes and all lighting thereof.
	NA	i. Location, size, and characteristics of all loading and unloading areas.
	NA	j. Location and design of all sidewalks, walkways, bicycle paths and areas for public use as approved by the Planning Commission.
	NA	k. Location of all other utilities on the site including but not limited to wells, septic systems, stormwater controls, natural gas, electric, cable TV, telephone and steam and proposed utility easements.
	NA	l. Proposed location, dimensions and details of common open spaces and common facilities such as community buildings or swimming pools if applicable.

# SITE PLAN REVIEW APPLICATION

## SITE PLAN REQUIREMENT CHECKLIST

(TO BE SUBMITTED WITH APPLICATION AND SITE PLAN)

INFORMATION SUPPLIED	WAIVER REQUESTED	REQUIREMENT
	NA	m. Location and specifications for all fences, walls, and other screening features.
	NA	n. Location and specifications for all existing and proposed perimeter and internal landscaping and other buffering features.
	NA	o. Exterior lighting locations with area of illumination illustrated as well as the type of fixtures and shielding to be used.
	NA	p. Location, size and specifications for screening of all trash receptacles and other solid waste disposal facilities.
Level Sight	NA	q. Elevation drawing(s) for proposed commercial and industrial structures.
	NA	r. Location and specifications for any existing or proposed above or below ground storage facilities for any chemicals, salts, flammable materials, or hazardous materials as well
	NA	s. Floor plans, when needed to determine the number of parking spaces required.

PLEASE LIST THE REQUIREMENT FOR WHICH A WAIVER IS BEING REQUESTED. ALSO PROVIDE AN EXPLANATION/REASON FOR THE WAIVER REQUEST.

**SECTION**

**REASON FOR WAIVER REQUEST**

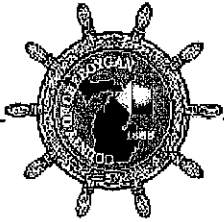
\_\_\_\_\_ sight is level topography  
 \_\_\_\_\_ not needed  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**AFFIDAVIT**

I CERTIFY THAT ALL SITE PLAN REQUIREMENTS (A THROUGH S) ARE DRAWN ON THE SITE PLAN, ATTACHED TO THIS APPLICATION AND/OR I AM REQUESTING A WAIVER. I CERTIFY THAT ALL INFORMATION AND DATA ATTACHED TO AND MADE PART OF THIS SPECIAL LAND USE PERMIT APPLICATION ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.


  
 SIGNATURE

1-22-19  
 DATE

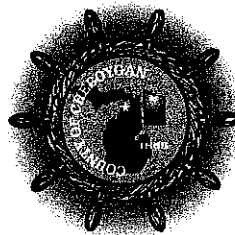


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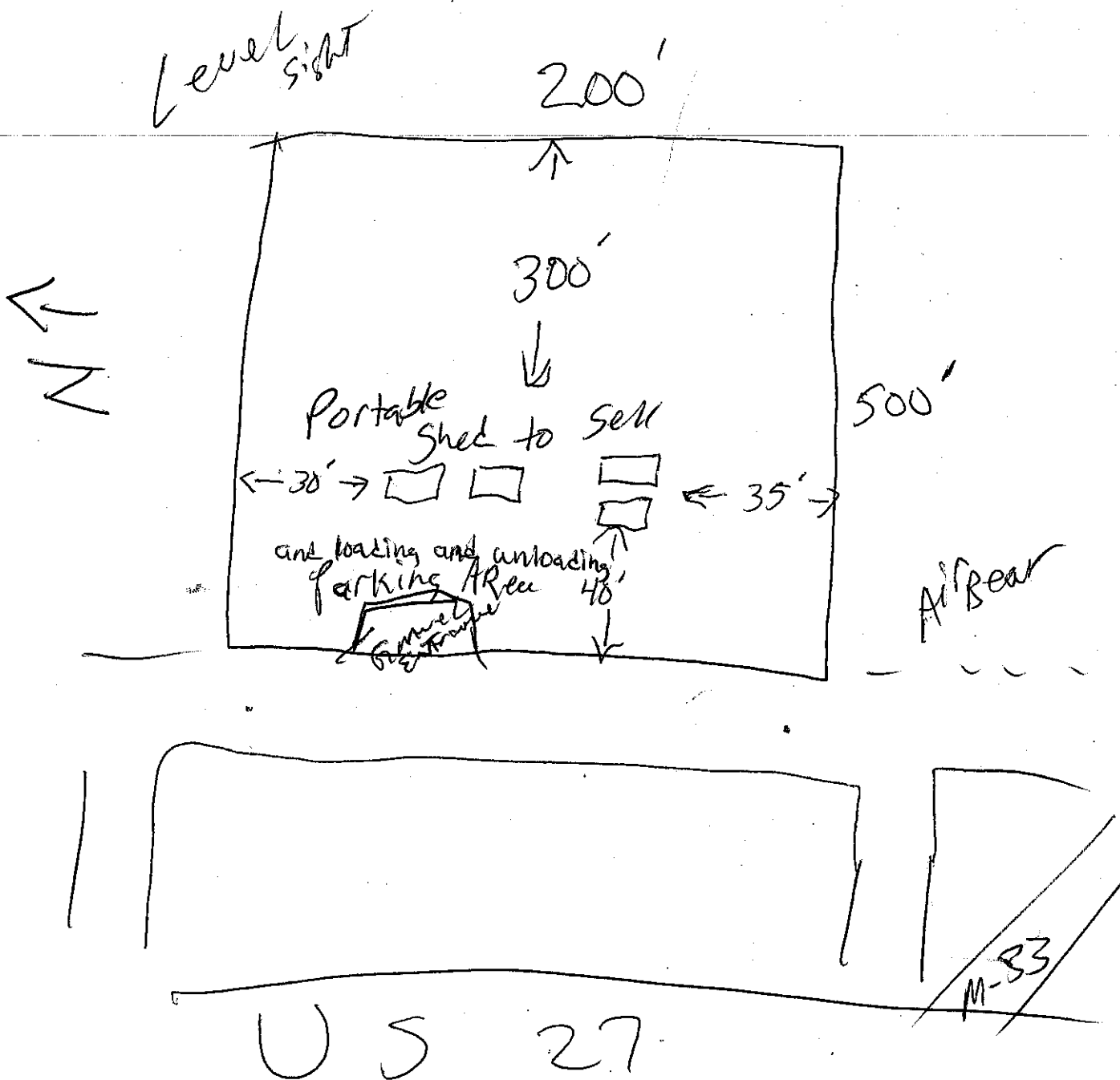
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PLANNING/ZONING DEPT USE ONLY		
Date Received:	1.22.2019	Notes:
Fee Amount Received:	\$170	
Receipt Number:	CASH	
Public Hearing Date:	2.20.2019	
Planning/Zoning Administrator Approval:		
		1.22.2019
Signature		Date

SITE PLAN REVIEW APPLICATION



**Michael Turisk**  
 Director of Planning & Zoning  
 Cheboygan County Building  
 870 South Main St., Room 103  
 P.O. Box 70  
 Cheboygan, MI 49721  
 Phone: 231-627-8485  
 Fax: 231-627-3646  
 mturisk@cheboygancounty.net  
 www.cheboygancounty.net/planning



2018

INVERNESS

Winter

Tax Bill

INVERNESS TOWNSHIP  
JOHANNA PLUSZCZYNSKI, TREASURER  
PO BOX 620  
CHEBOYGAN, MI 49721

PLEASE RETURN THIS PORTION WITH PAYMENT. THANK YOU.
This tax is due by: 02/28/2019 After 02/28/2019 additional interest and fees apply
2018 Winter Tax for Prop #: 092-017-100-005-03

To: FRANCE, PAUL & SHELLI H/W  
1951 HENNING'S RD  
CHEBOYGAN MI 49721

Make Check Payable To: INVERNESS TOWNSHIP

TOTAL AMOUNT DUE: 745.58

Amount Remitted: \_\_\_\_\_

Check must clear or receipt is void.

Check box for a receipt returned by mail.

Taxpayer Note: Is your mailing address correct? If not, please make corrections above. Thank you



\*\*\*\*Please detach and send top portion with payment to assure proper posting\*\*\*\*

2018

INVERNESS

Winter

<p>MESSAGE TO TAXPAYER</p> <p>DUE DECEMBER 1, 2018, TO AND INCLUDING, FEBRUARY 28, 2019, TO PAY WITHOUT PENALTY. MARCH 1, 2019 ALL DELINQUENT TAXES ARE PAYABLE TO THE COUNTY TREASURER, EXCEPT FOR PERSONAL PROPERTY TAXES, WHICH REMAIN PAYABLE TO THE TOWNSHIP TREASURER. MARCH 1, 2019 A 4% P.T.A.F OR \$1 MINIMUM, AND 1% PER MONTH WILL BE ADDED.</p>	<p>Pay by mail to: INVERNESS TOWNSHIP JOHANNA PLUSZCZYNSKI, TREASURER PO BOX 620 CHEBOYGAN, MI 49721 231-445-9085 <a href="mailto:INVERNESSTWPTRASURER@GMAIL.COM">INVERNESSTWPTRASURER@GMAIL.COM</a></p> <p><u>TAXES ARE PAYABLE AT CITIZENS NATIONAL BANK.</u></p>																																																
<p>PROPERTY INFORMATION</p> <p>Property Assessed To: FRANCE, PAUL &amp; SHELLI H/W 1951 HENNING'S RD CHEBOYGAN, MI 49721</p> <p>Prop #: 092-017-100-005-03 Prop Addr:</p> <p>CHEBOYGAN 16015 School: 16015</p> <p>Legal Description: PARCEL 2 CON AT NW COR SEC 17 TH S 1D W ALG W LI SD SEC 1662.61 FT TO POB TH S 8SD 10M E 499.61 FT TH S 1D W 221.22 FT TH N 86D 44M 05S W 500 FT TO W LI SD SEC TH N 1D E ALG SD SEC LI 200 FT TO POB BEING PART OF GOVT LOT 4 SEC 17 T 37 N R 1 W</p>	<p>TAX DETAIL</p> <table> <tr><td>Taxable Value:</td><td>50,893</td><td>200 COMMERCIAL</td></tr> <tr><td>State Equalized Value:</td><td>62,100</td><td>Class: 200</td></tr> <tr><td>Assessed Value:</td><td>62,100</td><td>US 27 DDA</td></tr> <tr><td>P.R.E. %:</td><td>0.0000</td><td>Mort Code:</td></tr> </table> <p>Taxes are based upon Taxable Value. 1 mill equals \$1.00 per \$1000 of Taxable Value. Amounts with no millage are either Special Assessments or other charges added to this bill.</p> <table> <thead> <tr><th>DESCRIPTION</th><th>MILLAGE</th><th>AMOUNT</th></tr> </thead> <tbody> <tr><td>SENIOR CITIZEN</td><td>0.50000</td><td>25.44</td></tr> <tr><td>AMBULANCE</td><td>0.25000</td><td>12.72</td></tr> <tr><td>COUNTY ROAD</td><td>1.00000</td><td>50.89</td></tr> <tr><td>CCE 911</td><td>0.50000</td><td>25.44</td></tr> <tr><td>TWP ALLOCATED</td><td>0.98500</td><td>50.12</td></tr> <tr><td>TWP FIRE</td><td>0.97900</td><td>49.82</td></tr> <tr><td>TWP ROAD</td><td>0.98500</td><td>50.12</td></tr> <tr><td>LIBRARY OPER</td><td>1.09590</td><td>55.77</td></tr> <tr><td>LIBRARY CONST</td><td>0.43900</td><td>22.34</td></tr> <tr><td>COPISD</td><td>1.74760</td><td>88.94</td></tr> <tr><td>Sewer Project</td><td></td><td>306.60</td></tr> </tbody> </table>	Taxable Value:	50,893	200 COMMERCIAL	State Equalized Value:	62,100	Class: 200	Assessed Value:	62,100	US 27 DDA	P.R.E. %:	0.0000	Mort Code:	DESCRIPTION	MILLAGE	AMOUNT	SENIOR CITIZEN	0.50000	25.44	AMBULANCE	0.25000	12.72	COUNTY ROAD	1.00000	50.89	CCE 911	0.50000	25.44	TWP ALLOCATED	0.98500	50.12	TWP FIRE	0.97900	49.82	TWP ROAD	0.98500	50.12	LIBRARY OPER	1.09590	55.77	LIBRARY CONST	0.43900	22.34	COPISD	1.74760	88.94	Sewer Project		306.60
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<p>OPERATING FISCAL YEARS</p> <p>The taxes on bill will be used for governmental operations for the following fiscal year(s):</p> <p>County: 01/01/2018 - 12/31/2019 Twp/Vil/City: 04/01/2018 - 03/31/2019 School: 07/01/2018 - 06/30/2019 State: 10/01/2018 - 09/30/2019</p> <p>Does NOT affect when the tax is due or its amount</p>	<table> <tr><td>Total Tax</td><td>8.48150</td><td>736.20</td></tr> <tr><td>Administration Fee</td><td></td><td>7.38</td></tr> <tr><td><b>TOTAL AMOUNT DUE</b></td><td></td><td><b>745.58</b></td></tr> </table>	Total Tax	8.48150	736.20	Administration Fee		7.38	<b>TOTAL AMOUNT DUE</b>		<b>745.58</b>																																							
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