

**SITE PLAN APPLICATION**  
**CITY OF SOUTH HAVEN**  
**BUILDING DEPARTMENT**  
539 PHOENIX STREET, SOUTH HAVEN, MICHIGAN 49090  
FOR INFORMATION CALL 269-637-0760

Project Address: \_\_\_\_\_ Tax ID 80-53- \_\_\_\_\_

Applicant: \_\_\_\_\_ Property Owner: \_\_\_\_\_

Appl. Address: \_\_\_\_\_ Owner Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Owner Phone: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Owner Email: \_\_\_\_\_

Current Use of Property: \_\_\_\_\_ Zoning District of Property \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PROPOSED USE: \_\_\_\_\_

SECTION NUMBER WHICH PERMITS THIS USE: \_\_\_\_\_

COMMENTS:

OWNER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DATE SUBMITTED: \_\_\_\_\_ DATE ACCEPTED: \_\_\_\_\_ BY: \_\_\_\_\_

FEE: \_\_\_\_\_ DATE OF PAYMENT: \_\_\_\_\_

FORM CONTINUES ON OTHER SIDE, PLEASE COMPLETE BACK OF SHEET

**SETBACKS (IN FEET):**

**FRONT YARD:** \_\_\_\_\_ **SIDE YARD:** \_\_\_\_\_

**REAR YARD:** \_\_\_\_\_ **SIDE YARD:** \_\_\_\_\_

**LOT AREA (IN SQUARE FEET)** \_\_\_\_\_

**LOT WIDTH (AT FRONT SETBACK)** \_\_\_\_\_

**AREA COVERAGE (BY ALL STRUCTURES)** \_\_\_\_\_

**HEIGHT (AVERAGE OF PEAK AND EAVE)** \_\_\_\_\_

**OFF-STREET PARKING, SECTION 1800**

**PARKING USE GROUP:** \_\_\_\_\_

**SECTION NUMBER:** 1800.12. \_\_\_\_\_

**PARKING REQUIREMENT:** \_\_\_\_\_

**PARKING REQUIREMENT  
CALCULATION:**

**REQUIRED PARKING SPACES** \_\_\_\_\_ **PROVIDED SPACES** \_\_\_\_\_

**DIMENSION OF INDIVIDUAL PARKING SPACES** \_\_\_\_\_

**COMMENTS:**