

# VILLAGE OF NEW HAVEN

PO Box 480429  
57775 Main  
New Haven Michigan 48048  
586-749-5301 Ext. 214  
Fax: 586-749-3408

## INFORMATION TO SUPPLY FOR FENCES AND OR SHEDS

### FENCES:

1. Two copies of your survey
2. Highlight on survey where the fence is going
3. Type of fence
4. Height of fence
5. Cost - \$35.00 Plan Review & \$60.00 Zoning Permit - Total of \$95.00

### SHEDS:

1. Two Copies of Plot Plans
2. Showing all measurements, of shed and setbacks from property lines and any structures.
3. Rat wall drawing
4. Type of shed and height (if you any info on the shed please submit with application)
5. Cost - \$35.00 Plan Review & \$60.00 Zoning Permit - Total of \$95.00

**VILLAGE OF NEW HAVEN**

**ZONING DEPARTMENT**

57775 Main Street  
P.O. Box 480429  
New Haven MI 48048-0429  
Phone (586) 749-5301 Ext. 214  
Fax (586) 749-3408

Date: \_\_\_\_\_

Project Address: \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_ Zoning: \_\_\_\_\_

Type of Project: \_\_\_\_\_ Square Feet: \_\_\_\_\_ Est. Cost: \_\_\_\_\_

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Owner: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor/  
Applicant: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Federal Employer I.D. # \_\_\_\_\_ Worker Comp. Ins. Carrier: \_\_\_\_\_

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of the State of Michigan and Ordinance of the Village of New Haven. All information submitted on this application is accurate to the best of my knowledge.

Applicant Signature: \_\_\_\_\_ Driver Licenses# \_\_\_\_\_

\*\*\*DO NOT WRITE BELOW THIS LINE\*\*\*

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Comments:

Building Official: \_\_\_\_\_ Date: \_\_\_\_\_