



# VILLAGE OF PINCKNEY

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## Land Use Permit Commercial Reoccupation

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

Zoning District: \_\_\_\_\_

Permit Number: \_\_\_\_\_

### Information

Job Site Location: \_\_\_\_\_

Tax Code #: 14- \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Phone #: \_\_\_\_\_

Applicant email: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Phone #: \_\_\_\_\_

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

Signature of Owner: \_\_\_\_\_

Business name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

☐ Permitted Use      ☐ Special Use (Additional Process Required)

**Certification:** I hereby certify that all uses for which this application is made will conform with Ordinances of the Village of Pinckney, Livingston County and the State of Michigan. Additional permits may be required prior to occupancy.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Requirements for Certificate of Occupancy:

- ☐ Submit 3 copies of scaled floor plan with dimensions of all fixtures, exits, etc.
- ☐ Permits must be obtained by Livingston County Building Department
- ☐ Separate Sign Permit
- ☐ Fire Department Inspection
- ☐ Final approval by Livingston County Building Department

Fee: \$ \_\_\_\_\_

Permit Has Been: ☐ Approved ☐ Denied

Zoning Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_