

CITY OF MACOMB
Office of Community Development

NON-CONFORMITY REGISTRATION

(Application for non-conformity registration shall contain sufficient information to enable proper review.)

Non-Conforming
Property Address: _____ Property ID: _____

Property Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Existing Non-Conformity Status: _____

(Office Use Only)

Non-Conforming Use/Structure: _____

Community Development Coordinator: _____

Date of approval: _____