

APPLICATION FOR SITE PLAN REVIEW
Metamora Township

(810) 678-2237
730 WEST DRYDEN ROAD, METAMORA, MI 48455

APPLICANT'S NAME _____

ADDRESS _____

CITY _____ ZIP CODE _____ PHONE _____

COMMON DESCRIPTION OF PROPERTY AND ADDRESS, IF ISSUED: _____

NAME OF PROPOSED BUSINESS OR DEVELOPMENT _____

COMPLETE LEGAL DESCRIPTION ☐ Attached ☐ Included on site plan

PRESENT ZONING _____ PRESENT USE _____

PROPOSED USE(S) _____ No. of Lots if Site Condominium: _____

ESTIMATED COMPLETION DATE OF PROPOSED PROJECT _____

ARE YOU THE SOLE LEGAL OWNER OF PROPERTY? ☐ YES ☐ NO

Provide names, addresses and signatures for all persons with a legal or financial interest in the property. All persons having legal interest in the property must sign this application.

	<i>Name (Please Print)</i>	<i>Address</i>	<i>Interest</i>	<i>Signature</i>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

I do hereby swear that all the statements, signatures, descriptions and exhibits submitted on or with this application are true and accurate to the best of my knowledge and that I am authorized to file this application and act on behalf of all owners of the property.

Signature of Applicant

Date

Provide thirteen (13) copies of this completed form and the site plan. The site plan shall comply with all requirements of the Zoning Ordinance, in particular, Section 1524. The applicant is responsible for obtaining a copy of the Zoning Ordinance from the Township Clerk. The applicant or representative must be present at the Planning Commission meeting or no action will be taken. The attached "checklist" is designed to assist in preparing the site plan.

Office Use Only

Date Received _____

By: _____

Fee Paid: _____

Planning Commission Action ☐ Approved ☐ Denied (Date): _____

Case # SP -- --