

APPLICATION FOR SPECIAL LAND USE APPROVAL

Metamora Township

(810) 678-2237

730 WEST DRYDEN ROAD, METAMORA, MI 48455

APPLICANT'S NAME Dale WalkerADDRESS 280 East SuttonCITY Metamora ZIP CODE 48455 PHONE 810-728-2809

COMMON DESCRIPTION OF PROPERTY AND ADDRESS, IF ISSUED: _____

COMPLETE LEGAL DESCRIPTION

☒ Attached☐ Included on site planREQUIRED SITE PLAN ☐ Attached ***Application will not be accepted without required site plan***EXISTING ZONING SLU, Agg PROPOSED SPECIAL LAND USE UNDER SECTION _____PROPOSED USE To amend The 1997 SLU permitESTIMATED COMPLETION DATE OF PROPOSED PROJECT 10 YearsARE 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.

Name (Please Print)

Address

Interest

Signature

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.

Dale Walker

Signature of Applicant

2-9-21

Date

Provide fourteen (14) copies of this completed form and the required 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: First Introduction (Date) _____ Public Hearing (Date) _____

Case # SLU _____