

MONTAGUE TOWNSHIP
APPLICATION TO PLANNING COMMISSION FOR SITE PLAN REVIEW

Note: This application form is intended for use for all requests for site plan review as set forth in Article 8 of the Montague Township Zoning Ordinance. A copy of Section 8 is attached to this application form.

1. Name and Address of Applicant(s): _____

2. Applicant's telephone Number: _____

3. Name(s) and address(es) of owners of the property, if other than the applicants as set forth in paragraph 1: _____

4. Property Address: _____

5. Property legal description: Attach to this application a copy of the deed, land contract memorandum, title insurance policy, or other document indicating the full and correct legal description of the property for which a conditional use permit is sought. Also attach a copy of a survey (if the Applicant has one).

6. Property Tax Identification Number: _____
(May be obtained from property tax bill or notice)

7. Projected construction start-up date for project, if the site plan is approved: _____

8. Checklist: **Has the Applicant submitted with this application the following:**

a. Payment of the \$75.00 site application fee (checks made payable to Montague Township)? ___Yes ___ No

b. Has the Applicant submitted the document(s) and information as required by Section 8.04 of the Zoning Ordinance and by paragraph 5 of this application?: ___Yes ___ No

9. Additional Statements. If there is any additional information that the applicant believes is important, set forth the information on an additional sheet and attach it to this application.

Date: _____

Applicant*

Date: _____

Owner*

*If the Applicant is not the Owner of the property, then both the Applicant and the Owner must sign this application.

DECISION OF PLANNING COMMISSION

The recommendation of Planning Commission is:

_____a. Approved, for the following reasons (attach additional sheets as necessary): _____

_____b. Denied, for the following reasons (attach additional sheets as necessary):

_____c. Approved, subject to the following additional terms and conditions. Attach additional sheets if necessary): _____

Dated: _____

Planning Commission Chairperson