

Request Number: \_\_\_\_\_

Filing Fee: \$200

Form last revised: 9.23.14



8 Linden Street  
Three Oaks, Michigan 49128

Phone (269) 756-9801  
Fax (269) 756-2209

### THREE OAKS TOWNSHIP APPLICATION FOR SITE PLAN REVIEW

- All drawings must be sealed by an architect, engineer or surveyor unless waived by the Planning Commission.
- Township review of site plans will follow the procedures of Article 16 of the Zoning Ordinance
- 12 copies of the site plan must be submitted to the Township Clerk's office prior to the meeting at which the site plan will be considered
- After approval, public works and building permits must be secured before construction may commence.

1. Street Address and/or Location of Request: \_\_\_\_\_

2. Parcel Identification Number (Tax I.D. No.): # \_\_\_\_\_

3. Applicant's Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Fax Number \_\_\_\_\_ Email Address \_\_\_\_\_

4. Are You:  Property Owner  Owner's Agent  Contract Purchaser  Option Holder

5. Applicant is being represented by: \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_

6. Present Zoning of Parcel \_\_\_\_\_ Present Use of Parcel \_\_\_\_\_

7. Present Zoning of All Adjacent Properties \_\_\_\_\_

8. Dimensions of Parcel: \_\_\_\_\_ Total Acreage of Parcel: \_\_\_\_\_

9. Description of proposed development (attach additional materials if needed):  
\_\_\_\_\_  
\_\_\_\_\_

**In addition, applicants must provide the following:**

1. An application fee and review escrow as determined by resolution of the Township Board
2. Proof of property ownership, or intent to purchase

**The facts presented on the previous page are true and correct to the best of my knowledge.**

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

Type or Print Your Name Here: \_\_\_\_\_

Property Owner Approval: As owner I hereby authorize the submittal of this application and agree to abide by any decision made in response to it. \_\_\_\_\_

<b>OFFICIAL USE ONLY</b>	
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____ Comments: _____
_____	
Authorized Signature: _____	Title: _____