

SAUGATUCK TOWNSHIP

3461 Blue Star Hwy - Saugatuck, Michigan 49453

(269) 857-7721 – Fax (269) 857-4542

www.saugatucktownship.org

APPLICATION FOR REZONING

Please complete all of the following information, then sign and return this form to the Township Office. To be placed on the Planning Commission agenda, the following statements and any accompanying materials must be complete and accurate.

I. GENERAL INFORMATION

Property Owners _____

Phone _____ Fax _____

Address _____ City _____

State _____ Zip _____

Parcel No. _____ Existing Zoning _____

Proposed Zoning _____

Developmental Firm _____

Project Director _____ Phone _____

Address _____ City _____

State _____ Zip _____ Fax _____

Property Address _____ Acreage _____

II. PROJECT INFORMATION

Legal Description of Property

Description of Proposed Land Use Development

Reason for Rezoning Request

III. APPLICATION PROCEDURE

The application for rezoning and all other submission requirements must be submitted to the Zoning Administrator's Office thirty (30) days prior to the Planning Commission meeting date.

If there is not sufficient space to fully describe the proposed development, please attach additional information as may be needed.

The rezoning fee shall be required at the time the request is filed with the Zoning Administrator. Currently, \$1,200 plus \$10 per acre for each acre per application. Each parcel as it appears on Township tax roles will be considered a separated application for purpose of determining fee.

The developers and /or owners attendance is required at the Planning Commission meeting to answer questions and /or to present any necessary plans or drawings.

Saugatuck Township reserves the right to deny acceptance of any request until such time as all requirements are met. Any revisions and /or modifications to the site plan, elevations, and other pertinent information must be resubmitted to the Zoning Office for review. No Planning Commission action will be initiated until such time as these requirements are completely fulfilled.

I hereby authorize the Saugatuck Township staff to inspect this site at their discretion and that I have a legal or equitable interest in all land subject to his application

Applicant signature _____ Date _____

For Office Use: Date Received _____; Fee Received _____;

Amount \$ _____ Hearing Date _____;

Action _____

