

Bengal Township

Special Land Use Application

Please mail application, site plan, all relative documents, and fees to:

800 South US27 #124
St. Johns, Michigan 48879

Applicant – Please check one of the following:	
<input type="checkbox"/>	Administrative Review
<input type="checkbox"/>	Site Plan Review*
<input type="checkbox"/>	Special Use Permit*
* Administrative Review is <i>required</i> prior to making application for Site Plan Review or Special Use Permit	

<u>PLANNING DEPARTMENT USE ONLY</u>	
Application Received: _____	
Fee: _____	Receipt #: _____
Sent to McKenna Associates: _____	

A special land use application must be submitted with a comprehensive site plan. Site plans shall consist of an overall plan for the entire development. All plans must be legible and sufficient quality to provide for reproduction.

Applicant must provide **15 copies** of the site plan, application, fees, and all relative documents at least thirty (30) days prior to the next regularly scheduled meeting of the Planning Commission.

All Site Plans and Special Use Applications will be reviewed by McKenna Associates. Applicant will receive written comments and recommendations prior to Planning Commission meeting.

DATE _____ PROJECT ADDRESS _____

APPLICANT INFORMATION

Name:

Address:

City:

State:

Zip:

Phone:

Cell:

Email:

PROPERTY OWNER INFORMATION

Name:

Address:

City:

State:

Zip:

Phone:

Cell:

Email:

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If applicant is not the owner, describe applicant's interest in the property. (Proof of ownership of affidavit is required)

PROPERTY DESCRIPTION

Description of Proposed Project:

Zoning Classification: ☐ A-2 (General Agriculture) ☐ I-1 (Light Industrial)

Parcel Number:

Property Description:

Sanitary Facilities:

Present Use:

Proposed Use:

ATTACH THE FOLLOWING:

1. 15 folded copies of the site plan, sealed by a registered architect, engineer, or landscape architect.
2. A brief written description of the proposed use of property.
3. Proof of property ownership.

PLEASE NOTE: The applicant or a designated representative **MUST BE PRESENT** at all scheduled review meetings or the site plan may be tabled due to lack of representation.

APPLICANT'S ENDORSEMENT

All information contained herein is true and accurate to the best of my knowledge. I acknowledge that the Planning Commission will not review my application unless all information required in this application and the Zoning Ordinance have been submitted. I further acknowledge that the Township and its employees or agents shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this site plan application.

Signature of Applicant

Date

Signature of Applicant

Date

Signature of Property Owner

Date