

CALEDONIA TOWNSHIP APPLICATION

Please check one and include Fee of \$200:

- Special Land Use
- Variance
- Appeal
- Rezoning

PERMIT NUMBER: _____

DATE FILED: _____

FEE PAID: _____

CHECK NUMBER: _____

RETURN TO: Zoning Administrator, Nancy Beck, 537 Spruce Road, Spruce, MI 48762

Brief Description of Request (use back if needed): _____

Property Identification Number: _____

Legal Description (use back if needed): _____

Property Address: _____

I hereby grant permission for members of the Township (Planning Commission) (Zoning Board of Appeals) (Township Board) (Staff) to enter the property described on this application (or as described on the attached sheet) for the purposes of gathering information related to this application.

NOTE: When possible, an appointment will be scheduled.

Applicant's Name: _____

Applicant's Address: _____

Phone Number: _____

Email Address: _____

Existing Zoning of Property: _____ Is Rezoning Necessary: YES / NO

Site Plan Minimum Requirements: A properly scaled Site Plan with a preferred scale of 1 inch to 50 feet or greater. Attach any other applicable information.

Applicant's Signature: _____

Public Hearing Date: _____

Caledonia Township Action: _____

Date: _____

Expiration Date: _____