## **Special Land Use Application**

Applications Due: 1st Wednesday of every month

4350 Peppermill Road P.O. Box 86 Attica, MI 48412 atticatownship.org



Applicant:		_Applicant Addres	ss:	
Phone:	Email:			
Property ID (Parcel #):				
Property Address:			Area of I	Parcel:
Current Zoning District:	Existing Use:			
Proposed Use/Description:				
Applying for Variances: $\square$ Yes	□ No			
Copies of Site Plan/Plot Plan:	☐ Digital Copy	☐ 3 Hard Copie	s (36 by 24)	☐ 8 Hard Copy (11 by 17)
I do hereby swear that all stater are true and accurate to the bes the subject property. The under is true and correct.	st of my knowledge ar	nd that I am autho	rized to file and	d act on behalf of all owners of
Applicant Signature:			Date:	
Are you the Legal Ownership of	Subject Property? $\square$	Yes □ No		
If no, have the property owner f	ill out and sign this p	ortion of the appli	cation.	
Name:	Signatu	re:		Date:
By signing this application, I conse acknowledge that I am responsible may be billed in addition to the init	e for all cost incurred by	y the Township in the		• •
	Offi	cial Use Only		
Received By:	Received Da	te:	Case #:	Fee Paid:
Planning Commission Public He	earing Date:			
Township Board Decision Date:		_   Approved	□Approved	with Conditions   □Denied
Conditions/Notes:				