



VILLAGE OF STOCKBRIDGE
APPLICATION FOR SPECIAL USE PERMIT

Village of Stockbridge Michigan (Modified) Code of Ordinance Chapter VI,
article IV, Zoning district Regulations 6-44

Drawings I required shall be a minimum of 11" X 17 "

Instructions to applicant: Please complete the information below and submit this application with the
applicable Fees and attached completed checklist. And this application for certification

PROJECT NAME: _____

LEGAL OWNER PROPERTY; _____

DEVELOPER/OWNER _____

ADDRESS: _____

EMAIL of the owner of property _____

E-Mail of business owner _____

PHONE NUMBER Business owner: _____

Estimated Completion Date (if applicable) _____

Property Legal Description: _____

Address of Property: _____

Tax ID number of property _____ Existing Zoning of Property: _____

Numbers of residential equivalent units. (REUs) _____

Description of what type of business specifically will be occupying space

Hours of operation _____

Number of Existing Parking spaces _____

APPLICATION FEES: See Fee Schedule. Total fees Collected; _____

Applicants: Signature: _____ Date _____

OFFICIAL ACTION: Village Office Date Received: _____

Type of Action: Sent to Zoning Administrator Date: _____

Date application Received: _____

Zoning administrator approval / rejection: _____ Date: _____

Planning commission Chair approval / rejection _____ Date: _____

Date sent too Planning commission _____ Date Hearing set _____

PROPERTY INFORMATION

1. Property Description:

The following information shall be including on drawings submitted with application.

- a. Lot dimensions
- b. Location of proposed and existing structures on site.
- c. Proposed setbacks and yards
- d. Streets right-of-way, widths, and street names
- e. Provisions for water and sewer service.
- f. OTHER INFORMATION as may be required by provisions of the zoning ordinance. Additional information required by zoning administrator or planning commissioning shall be attached and made a part of this application.

2. AFFIDAVIT: The undersigned affirms that he is (they are, the (specify: owner, lessee, or other interest) involved in this petition, and that the foregoing answers, statements, and information are in all respects true and to the best of this (their) knowledge, correct.

Signed _____

Date: _____

Address _____

NOTE: *(The party or parties signing the above affidavit should remember that his or their right to the above permit is subject to annual review. The standards on which this permit is issued must be maintained to insure annual renewal).*

Action taken by Planning Commission [] Approved [] Not Approved [] approved with conditions

Planning Commission Chair Signature _____

Date: _____

CLERK, VILLAGE OF STOCKBRIDGE

Date Received: _____

Date of Public Hearing: _____

Date of Advertising: _____