

Casco Township
7104 107th Avenue
South Haven, Michigan 49090
(269) 637-4441 / Fax (269) 639-1991

SITE PLAN REVIEW/SPECIAL USE/PUD APPLICATION & REQUIREMENTS

1. **Applicant Information:**
Name _____
Address _____ City _____ State _____ Zip _____
Telephone _____ Fax _____
Person in charge of project _____
2. **Property Information:**
Address: _____
Parcel #: 0302- - - ; Do you own the parcel? Yes _____; No _____
Current Zoning _____ Conforming use in zone? Yes _____; No _____
Other action required?: Variance _____; Re-zone _____; Special Use _____
3. **Type of improvement (Check as many as applicable)**
 New Building Addition Condominium Site Condominium
 Open Space Dev. Subdivision PUD
 Other (Describe) _____
4. **Engineer or Surveyor Information:**
Name _____ Address _____
City _____ State _____ Zip _____ Phone _____ License # _____
5. **State proposed use of property:** _____

6. **Provide site plan as per Chapter 17 of the Casco Township Zoning Ordinance.**
Did you receive a copy of Chapter 17 and the Checklist? Yes _____; No _____.
Provide information requested in Chapter 15 if Special Use.
Provide information requested in Chapter 16 if PUD.
Provide information requested in Section 15.04(Z) if Open Space Preservation project.
7. **Provide a brief narrative describing the items listed in Section 17.03(a) and the following:**
 - a. Types and size of structures to be erected.
 - b. Timetable regarding stages of project and completion date.
 - c. Any objective or subjective information you wish to convey to the Planning Commission.

Applications with completed site plan and other required information must be filed with the Zoning Department at the Township Office 35 days before the scheduled Planning Commission meeting. All amended site plans must be submitted at least 21 days before the meeting or the hearing/ review will not be held. All applicable fees must be paid at that time. By signing this application, I agree to pay all applicable fees and costs associated with the site plan review process as detailed on the reverse of this application.

I hereby authorize Casco Township Planning Commission members and Township staff to inspect the proposed site at their discretion.

Applicant Signature _____ Date _____

For Office Use: Date Rec'd: _____; Fee Rec'd _____; Fee Amt. _____ Hearing Date _____

Remark : _____

For Planning Commission Use:

Hearing date: _____ Disposition _____

2nd Hearing _____ Disposition _____

3rd Hearing _____ Disposition _____

Conditions: _____

Two copies of the approved site plans should be signed by the applicant and all Planning Commissioners present. One copy is retained for the permanent Township files and one copy is given to the applicant or his representative.

Fee Policy - Added to all the pertinent non-refundable fees set forth in the Consolidated Fee Schedule will be the actual cost of planner, engineer, attorney, or other consultant in attendance, and any special reports or special reviews. An escrow fund may be established at the beginning of the project based upon reasonable anticipated costs for such consultants. These costs must be paid whether the project is approved or denied. Any portion of this fund not used for the above purposes will be refunded at the completion of the review process. No building permits would be issued unless all fees are paid to the Township.