

Village of Cass City

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 Office Hours 8:00am to 4:30pm M-F

INTERNAL USE ONLY

Date Received:
 Received By:
 Permit #:
 Receipt #:
 Method of Payment:

Fee: \$

This completed Special Land Use Application must be accompanied by a completed Zoning Permit Application. When requesting a Special Land Use, use must be outlined in the Cass City Zoning Ordinance – uses not listed in the Ordinance must go through a rezoning request. A site plan review by the Planning Commission cannot take place without both a completed Special Land Use Application and Zoning Permit Application.

APPLICATION MUST BE COMPLETE - INCOMPLETE APPS MAY BE RETURNED TO THE APPLICANTS

1. JOB LOCATION

Job Address:			Property Code:
City/Village:	Township:	County:	Zip Code:
Between:			And:

2. APPLICANT INFORMATION

Applicant Name:		Address:	
City/Village:	Twp:	County:	Zip Code:
Home Phone:		Work Phone:	Fax:

3. ZONING QUESTIONS

What is the zoning district of the property?	
What is the proposed special land use?	
Will new construction or alteration of an existing structure be required?	☐ YES ☐ NO

4. SPECIAL LAND USE QUESTIONS

Will road improvements be necessary to adequately serve the proposed Special Land Use?	☐ YES ☐ NO
Will additional or extraordinary public services be required to serve the proposed Special Land Use?	☐ YES ☐ NO
Are additional site improvements necessary for the proposed Special Land Use to meet zoning requirements?	☐ YES ☐ NO
Will the proposed Special Land Use in any manner create any dangerous, injurious, noxious, or otherwise objectionable elements or conditions so as to adversely affect the surrounding area or adjoining premises?	☐ YES ☐ NO
Will the proposed Special Land Use create noise, vibration, odor, air pollution, glare, erosion, or other nuisances?	☐ YES ☐ NO

If "YES" to any of the above, please explain (add additional pages/documentation as necessary):

6. RESPONSIBILITIES OF APPLICANT

It is the applicant's responsibility to be aware of any deed restrictions, subdivision regulations, flood plain regulations, and wetland regulations. All of the information included in this form are true to the best of my knowledge and belief.

Signature:

Driver's License #:

Date: