



Application for Special Exception Permit

City of Pontiac

Office of Land Use and Strategic Planning

47450 Woodward Ave, Pontiac, MI 48342

T: 248.758.2800

F: 248.758.2827

Property/Project Address: _____

Sidwell Number: _____

Date: _____

Office Use Only

PF Number: _____

Instructions: Completed application with appropriate fee shall be submitted to the Office of Land Use and Strategic Planning at least **30 days** prior to the scheduled Planning Commission Meeting. Application must complete in all respects with supporting documents such as site plan, property survey, detailed description of the proposed use, etc. Incomplete applications will delay the review process.

Applicant (please print or type)

Name			
Address			
City			
State			
ZIP Code			
Telephone	Main: _____	Cell: _____	Fax: _____
E-Mail			

Project and Property Information

Name of Proposed Development: _____

The subject property is location at _____ on the N / S / E / W side of _____ between _____ and _____ .

The property is zoned: _____

It is proposed that the property will be used as: _____

The subject property is legally described as follows (include sidwell numbers):

Property Owner Information

Name			
Address			
City			
State			
ZIP Code			
Telephone	Main:	Cell:	Fax:
E-Mail			

Are you the _____ Owner _____ Agent/rep. of the owner _____ Other _____

The proposed will be used for the following purpose (provide as much detail as possible with photographs, sketches, site plans, written documents, etc.).

Supporting materials required:

- ☐ Proof of ownership, purchase/lease agreement
- ☐ Site plan, floor plan, elevations/photographs
- ☐ Electronic copy of site plan associate planner

Signature of Owner

Signature of Applicant

State of Michigan
County of Oakland

On this ____ day of _____, A.D., 20____, before me personally appeared the above named person, who being duly sworn, stated he/she has read the foregoing application, by him/her signed, and know the contents thereof, and that the same is true of his/her own knowledge, except as to the matters therein stated to be upon information and belief and so as to those matters he/she believes it to be true.

Notary Public, Oakland County, Michigan
My Commission Expires: _____