

Special Land Use Application

Applications Due: 4th Wednesday by 4:00pm
of every month

Planning & Zoning

150 N. Main Street
Imlay City MI 48444

adminasst@imlaycity.org
810-724-2135



Applicant:

Applicant Address:

Phone:

Email:

Property Owner (if not the same):

Phone:

Property Owner Address:

Email:

Property ID (Parcel #):

Property Address:

Lot Size:

Current Zoning District:

Existing Use:

Proposed Use/Description:

Applying for Variances: ☐ Yes ☐ No

Copies of Site Plan/Plot Plan: ☐ Digital Copy ☐ 4 Hard Copies (36 by 24) ☐ 2 Hard Copy (11 by 17)

I do hereby swear that all statements, signatures, descriptions and exhibits submitted on or with this application are true and accurate to the best of my knowledge and that I am authorized to file and act on behalf of all owners of the subject property. The undersigned deposes that foregoing statements, answers, and accompanied information is true and correct.

Applicant Signature:

Date:

Are you the Legal Ownership of Subject Property? ☐ Yes ☐ No

If no, have the property owner fill out and sign this portion of the application. Include purchase agreement or other documentation regarding ownership consent.

Name:

Signature:

Date:

By signing this application, I consent to City Officials coming onto the subject property to evaluate this application. I acknowledge that I am responsible for all cost incurred by the City in the processing of this application and accept I may be billed in addition to the initial fees or performance bond.

Official Use Only

Received By: _____ Received Date: _____ Case #: _____ Fee Paid: _____

Planning Commission Public Hearing Date: _____

Planning Commission Decision Date: _____ ☐ Approved ☐ Approved with Conditions ☐ Denied

Conditions/Notes: _____