BASED ON VALUE OF PROJECT TO \$200,000 = \$550.00 OVER \$200,000 \$550 + \$1.00/\$1,000 OVER \$200,000 MAXIMUM \$1,500.00

CASE	
MTG	DATE
PMT	

APPLICATION FOR SITE PLAN REVIEW

Charter Township of Flint 1490 South Dye Rd. Flint, MI 48532 (810) 600-3236 Phone (810) 733-6919 Fax

Petitioner		
Address, City, St, Zip		
Phone		
Represented by		
Address, City, St, Zip		
Phone		
Property Owner		
Address, City, St, Zip		
Phone		
Location of property for	proposed project	
Name of subdivision (if any)	Lot#
The N S E W side of	street/road, be	etween
andst	reet/road.	
Parcel tax number	Lot Size	
Zoning Designation of prope	erty	
Existing use of property((Commerical, Industrial, Reside	ential, or vacant)
Further, I agree to comply with the conditi that may be issued is with the understandin with. Further, I agree to notify the Buildin, and when locations of proposed uses are m of Flint, the County of Genesee and the St inspection. Finally, I understand this is a z	ons and regulations provided with any permiting all applicable sections of the Charter Town g Department of the Charter Township of Flinarked on the ground. Further, I agree to give ate of Michigan to enter the property subject oning permit application (not a permit) and the	ny zoning permit that may be issued may be void t that may be issued. Further, I agree the permit nship of Flint Zoning Ordinance will be complied not for inspection before the start of construction permission for officials of the Charter Township to this permit application for purposes of nat a special land use permit, if issued, conveys any other statute, building code, deed restriction
Signed:	Date	:
Application	Date Accepted	Date Rejected