



7275 W. Main Street, Kalamazoo, Michigan 49009-9334  
Phone: 269-375-4260 Fax: 269-375-7180

**PLEASE PRINT**

PROJECT NAME & ADDRESS \_\_\_\_\_

**PLANNING & ZONING APPLICATION**

Applicant Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Interest in Property: \_\_\_\_\_

OWNER\*:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone & Fax: \_\_\_\_\_

THIS  
SPACE  
FOR  
TOWNSHIP  
USE  
ONLY

Fee Amount \_\_\_\_\_

Escrow Amount \_\_\_\_\_

NATURE OF THE REQUEST: (Please check the appropriate item(s))

- Pre-Application Review
- Site Plan Review – I088
- Administrative Site Plan Review – I086
- Special Exception Use – I085
- Zoning Variance – I092
- Site Condominium – I084
- Accessory Building Review – I083
- Rezoning – I091
- Subdivision Plat Review – I089
- Interpretation – I082
- Other: \_\_\_\_\_

**BRIEFLY DESCRIBE YOUR REQUEST** (Use Attachments if Necessary): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**LEGAL DESCRIPTION OF PROPERTY** (Use Attachments if Necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PARCEL NUMBER:** 3905- \_\_\_\_\_

**ADDRESS OF PROPERTY:** \_\_\_\_\_

**PRESENT USE OF THE PROPERTY:** \_\_\_\_\_

**PRESENT ZONING:** \_\_\_\_\_ **SIZE OF PROPERTY:** \_\_\_\_\_

**NAME(S) & ADDRESS(ES) OF ALL OTHER PERSONS, CORPORATIONS, OR FIRMS HAVING  
A LEGAL OR EQUITABLE INTEREST IN THE PROPERTY:**

**Name(s)**

**Address(es)**

\_\_\_\_\_  
\_\_\_\_\_

***SIGNATURES***

*I (we) the undersigned certify that the information contained on this application form and the required documents attached hereto are to the best of my (our) knowledge true and accurate. I (we) acknowledge that we have received the Township’s Disclaimer Regarding Sewer and Water Infrastructure. By submitting this Planning & Zoning Application, I (we) grant permission for Oshtemo Township officials and agents to enter the subject property of the application as part of completing the reviews necessary to process the application.*

\_\_\_\_\_  
**Owner’s Signature** (*\*If different from Applicant*)      **Date**

\_\_\_\_\_  
**Applicant’s Signature**      **Date**

- Copies to:
- Planning – 1
- Applicant – 1
- Clerk – 1
- Deputy Clerk – 1
- Attorney – 1
- Assessor – 1
- Planning Secretary – Original

\*\*\*\*

**PLEASE ATTACH ALL REQUIRED DOCUMENTS**