



**CITY OF GARDEN CITY
SITE PLAN REVIEW APPLICATION**

Date Submitted:
Case No.

6000 Middlebelt Road, Garden City MI 48135
734.793.1650 Fax 734.793.1651

NOTICE TO APPLICANT: Applications for Site Plan Review must be submitted to the City *in substantially complete form*. The application must be accompanied by the data specified in the Zoning Ordinance, plus the required review fees, a minimum of 30 days prior to Planning Commission meeting. Regular meetings of the Planning Commission are held on the second Thursday of each month at 6:30 p.m. All meetings are held at the City Hall, 6000 Middlebelt Road. A copy of the City's Zoning Ordinance can be found in the library at www.amlegal.com

TO BE COMPLETED BY APPLICANT:

I (we) the undersigned, do hereby respectfully request Site Plan Review and provide the following information to assist in the review:

Applicant: _____

Mailing Address: _____

Telephone: _____ Email: _____

Property Owner(s) (if different from Applicant): _____

Mailing Address: _____

Telephone: _____ Email: _____

Applicant's Legal Interest in Property: _____

PROPERTY DESCRIPTION:

Location of Property/Street Address: _____

Nearest Cross Streets: _____

Parcel Number: _____

Property Description:

If part of a recorded plat, provide lot numbers and subdivision name. If not part of a recorded plat (i.e., Acreage parcel), provide metes and bounds description. Attach separate sheets if necessary.

Property Size: (Square Feet): _____ (Acres) _____

EXISTING ZONING (please circle)

- | | | | |
|------------------------------|--------------------------------------|------------------------------|----------------------------|
| <input type="checkbox"/> R-1 | Single Family Residential District | <input type="checkbox"/> CBD | Central Business District |
| <input type="checkbox"/> R-2 | Two Family Residential District | <input type="checkbox"/> O-1 | Office District |
| <input type="checkbox"/> R-3 | Multiple Family Residential District | <input type="checkbox"/> PD | Planned Development |
| <input type="checkbox"/> C-1 | Local Business District | <input type="checkbox"/> M-1 | Light Industrial District |
| <input type="checkbox"/> C-2 | Community Business District | <input type="checkbox"/> VP | Vehicular Parking District |
| <input type="checkbox"/> C-3 | General Business District | <input type="checkbox"/> PRD | Public Recreation District |

PROJECT DESCRIPTION:

Present Use of Property: _____

Proposed Use of Property: _____

PROFESSIONALS WHO PREPARED DRAWINGS:

A. Name: _____

Mailing Address: _____

Telephone: _____ Email: _____

Primary Design Responsibility: _____

B. Name: _____

Mailing Address: _____

Telephone: _____ Email: _____

Primary Design Responsibility: _____

ATTACH THE FOLLOWING:

1. 18 folded copies of the site plan, sealed by a registered architect, engineer, landscape architect or community planner.
2. A brief written description of the existing and proposed uses, including but not limited to: hours of operation, number of employees on largest shift, number of company vehicles, etc.
3. Proof of property ownership.

4. If necessary, review comments or approval received from county, state, or federal agencies that have jurisdiction over the project, including but not limited to:

- Road Commission for Wayne County
- Michigan Department of Environmental Quality
- Wayne County Drain Commissioner
- Michigan Department of Natural Resources

PLEASE NOTE: The applicant or a designated representative **MUST BE PRESENT** at all scheduled review meetings or the site plan may be tabled due to lack of representation.

Failure to provide true and accurate information on this application shall provide sufficient grounds to deny approval of a site plan application or to revoke any permits granted subsequent to site plan approval.

APPLICANT'S ENDORSEMENT:

All information contained herein is true and accurate to the best of my knowledge. I acknowledge that the Planning Commission will not review my application unless all information required in this application and the Zoning Ordinance have been submitted. I further acknowledge that the City and its employees or agents shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this site plan application.

_____	_____
Signature of Applicant	Date
_____	_____
Signature of Applicant	Date
_____	_____
Signature of Property Owner Authorizing this Application	Date

TO BE COMPLETED BY THE CITY	Case No. _____
Date Submitted: _____	Fee Paid: _____
Received By: _____	Date of Public Hearing: _____
CITY ACTION	
Approved: _____	Denied: _____
Date of Action: _____	