

OFFICE OF THE PLANNING DIRECTOR  
Troy Langer

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Joe Petrucci

**APPLICATION FOR PLANNED DEVELOPMENTS AND ZONING AMENDMENTS**

<b>Property Address:</b>			<b>Development Name:</b>		
<b>Parcel Identification Number:</b>			<b>Zoning of Parcel:</b>	Current	Proposed
<b>Application Request Date:</b>				<b>Application Request Details:</b>	
<b>Related Case No: (Previously assigned)</b>	<input type="checkbox"/> Conceptual Review	\$500.00	<input type="checkbox"/> Text Amendment of Zoning Ordinance	\$1,000.00	
	<input type="checkbox"/> Preliminary Plan Review (Review; Public Hearing; Notices; Rezoning; Draft Development Agreement)	\$3,050.00	<input type="checkbox"/> Map Amendment /Rezoning	\$1,500.00	
	<input type="checkbox"/> Final Plan Review (Site Plan Review; Development Agreement; Zoning Map Amendment)	\$2,000.00	<input type="checkbox"/> Escrow (minimum) (Attorney Fees and Associated Costs)	\$500.00 (minimum)	
	<input type="checkbox"/> Amendment to an Approved Final Site Plan	\$1,200.00			
	<input type="checkbox"/> Additional Reviews	\$500.00	Total Fee:		
			Total Escrow:		
<b>General Description of Request:</b>					

**APPLICANT INFORMATION (MUST HAVE LEGAL INTEREST IN PROPERTY)**

Last Name	First	M.I.				
Street Address						
City	State	Zip				
Phone	Fax	E-mail Address				
Own the Property?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have offer to purchase property? (attach purchase agreement)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Lease the Property?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Lease Term: _____ years	With Option?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Other property interest (e.g. architect, attorney, et.)						

**PROPERTY OWNER INFORMATION (IF OTHER THAN APPLICANT)**

Last Name	First	M.I.			
Street Address					
City	State	Zip			
Phone	Fax	E-mail Address			
Signature of Owner:					

**ARCHITECT CONTACT**

Last Name

Street Address

City

Phone

Relationship to Applicant:

**ENGINEER CONTACT**

Last Name

Street Address

City

Phone

Relationship to Applicant:

**PLACEMENT OF SIGN**

In order to be eligible for a sign, the applicant must obtain approval from the Planning Department. To complete application, the applicant must submit a sign placement plan on the Township's sign placement ordinance.

Some applications may require a sign placement ordinance.

The applicant must submit a sign placement plan to the Planning Department.

**APPLICANT STATEMENT**

The applicant certifies that the proposed sign is in compliance with the Township's sign placement ordinance and that Hartland Township is not in compliance with the Township's sign placement ordinance.

**Signature of Applicant**

**Treasurer's Office**

This application is received at the Treasurer's Office on \_\_\_\_\_.

Account Number: \_\_\_\_\_

Account Number: \_\_\_\_\_

Receipt Number: \_\_\_\_\_