SPECIAL USE PERMIT / SITE PLAN REVIEW Banks Township **APPLICATION**



Banks Township, Antrim County, Michigan 6520 Center Street, Ellsworth, Michigan 49729

Phone: 231.588.6126 / Website: www.bankstownship.net

Zoning Administrator: Kurtis Busman (231) 676-2414 or zoning@bankstownship.net Application Number:

OWNER INFORMATION (Please Type or Print Clearly) Name:	(201) 070 2 111 01 2			
Mailing Address: City State Zip	OWNER INFORMATION (Please Type or Print Clearly)			
Mailing Address: City State Zip	Name:	Phone:		
APPLICANT'S INFORMATION Name:				
APPLICANT'S INFORMATION Name:	City	State	Zip	
Name:	Email Address:			
Mailing Address: City: State: Zip:		APPLICANT'S INFORMA	ATION	
Mailing Address: City: State: Zip:	Name:		Phone:	
City: State: Zip:				
PROPERTY INFORMATION Address:	City:	State:	Zip:	
Parcel Number/Property Description: Current Zoning of Property: If this project is one phase of a larger development and/or property subject to an existing / previous Site Plan Review, Special Use Permit, or Variance, what is/are the applicable permit number(s)?: Provide proof of current property ownership. If applicant is not the current property owner, also provide written permission to act as agent of, and complete contact information for the				
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Proposed Use/Change to Property:	
Estimated Start and Completion Dates:	
Affidavit: The undersigned affirms that he/she is the _other interested party) involved in this petition and that tion are in all respects true and, to the best of his/her k undersigned grants all officials, staff and consultants or required and appropriate to assess site conditions in su proposed project and/or current or future Special Use P	t the foregoing answers, statements and informa- knowledge, correct. By making this application, the f Banks Township access to the subject property as apport of a determination as to the suitability of the
Signed:	Date:
BELOW FOR TOWN	NSHIP USE ONLY
Application Number: Application Complete?	
Public Hearing/Meeting:Date	

Notes: