

Request Number: _____

Filing Fee: _____

3900 Riverside Road; PO Box 87
Riverside, MI 49084
Phone 269.849.0455
Fax 269.849.2454

Hagar Township

APPLICATION FOR SPECIAL LAND USE

- Drawings must be sealed by an architect, engineer or surveyor unless waived by the Zoning Administrator for sites less than 5 acres.
- The Planning Commission meets the first Tuesday of the month at 7:00 p.m. where plans are approved, rejected or modified.

1. Street Address and/or Location of Request: _____

2. Parcel Identification Number (Tax I.D. No.): # _____

3. Applicant's Name: _____ Phone Number _____

Address: _____
Street City State Zip

Fax Number _____ Email Address _____

4. Are You: Property Owner Owner's Agent Contract Purchaser Option Holder

5. Applicant is being represented by: _____ Phone Number _____

Address: _____

6. Present Zoning of Parcel _____ Present Use of Parcel _____

7. Description of proposed development (attach additional materials if needed):

The facts presented above are true and correct to the best of my knowledge.

Signature: _____ Date: _____

Type or Print Your Name Here: _____

Property Owner Approval: As owner I hereby authorize the submittal of this application and agree to abide by any decision made in response to it.

Owner Date