

PORT SHELDON TOWNSHIP
SPECIAL USE APPLICATION
FILING FEE \$400.00 (if site plan approval is not required)

TO THE PLANNING COMMISSION C/O The Zoning Administrator . Application is hereby made pursuant to the provisions of the Zoning Ordinance #32, Section 18.02

Name of Applicant _____ Phone _____

Mailing Address of Applicant _____

Address of Property In Question _____

Parcel Number of Subject Property _____ Zoning _____

Applicants Interest in Property _____

Name of Owner _____

Address of Owner _____ Phone _____

Present use of Structure/Premises _____

Proposed Use of Structure/Premises _____

Size of Existing/Proposed Structure _____

Description of Existing/Proposed Structure _____

Describe the nature of your request _____

If there has been a previous request involving the existing structure/premises, state the date of filing, character of request and disposition of same. _____

Signature of Applicant or Agent

A Site Plan and Building Plans must be submitted with this application. It is important that the applicant or a representative be present at the meeting when this application is considered.