

Frankenmuth Township
Application for Special Use Permit

Part 1: completed by applicant:

Applicant's name: _____
Address: _____
Phone Number: _____
E-mail: _____

Property owner: _____
Address: _____
Phone Number: _____
E-mail: _____

Purpose Requested: _____

Applicant's Signature: _____
Property Owner's Signature: _____

Part 2: Completed by Township Zoning Administrator

Township Section: _____ Parcel Number: _____
Zoning Classification: _____ Chapter/Section applicable to request: _____

Date Received: _____ Fee Receipt Number: _____
Public Notice date: _____ Notice to adjacent landowners date: _____
Township Planning Commission review date: _____

Part 3: Completed by Township Planning Commission Chairman

Request: Approved Denied

Conditions of approval (if any): _____

Township Planning Commission Chairman Signature: _____