



**SPECIAL USE PERMIT APPLICATION**

**BLUMFIELD TOWNSHIP**

**1175 W Vassar Rd**

**Reese, MI 48757**

**(989) 868 - 9512**

A Special Use Permit is required for all uses listed as allowed by Special Use Permit in each zoning district. A permit may only be applied for to establish a use that is allowed by special use permit in a specified district. A Special Use permit is discretionary in nature. A Special Use must first meet the guidelines established for that use in the Zoning & Planning Code. Additional requirements may be imposed by the Planning Commission during the review of the permit, depending on the specific circumstances surrounding the proposal. A special use permit requires a public hearing. The notification for this hearing must be printed in the paper and sent to all property owners within 300' of the subject property.

Date of Application \_\_\_\_\_ Application No. \_\_\_\_\_

Property Location \_\_\_\_\_ Tax ID # 06-12-6-\_\_\_\_-\_\_\_\_\_

Applicant's Name \_\_\_\_\_ Zoning District \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Property Owner's Name \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

I (We), the undersigned, do hereby respectfully make application and petition the Blumfield Township Planning Commission to call a public hearing to determine whether there are objections for the use of said property as specified below (feel free to attach any additional information):

Describe the existing use of the property/structure: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe the proposed use of the property/structure: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Furthermore, after reading the applicable Township Code section(s), it is my (our) belief that said special use permit would comply with all requirements listed therein. **Application for a special use permit must be submitted twenty-five (25) days prior to the Planning Commission meeting. Planning Commission meetings are held quarterly on first Monday of the month at 7:00 pm.**

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**-Office Use Only-**

Planning Commission Action: Date of First Appearance: \_\_\_\_\_ Date of Public Hearing: \_\_\_\_\_

Findings:  Approved  Denied  Other \_\_\_\_\_

Payment:  No Charge  Invoice  Cash  Check No. \_\_\_\_\_ Date Rec'd: \_\_\_\_\_