Village of Cass City

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Office Hours 8:00am to 4:30pm M-F

INTERNAL USE C	NLY
Date Received:	
Received By:	
Permit #:	
Receipt #:	Fee: \$
Method of Payment	

This completed Special Land Use Application must be accompanied by a completed Zoning Permit Application. When requesting a Special Land Use, use must be outlined in the Cass City Zoning Ordinance - uses not listed in the Ordinance must go through a rezoning request. A site plan review by the Planning Commission cannot take place without both a completed Special Land Use Application and Zoning Permit Application.

APPLICATION MUST BE COMPLETE - INCOMPLETE APPS MAY BE RETURNED TO THE APPLICANTS

I. JOB LOCATION								
Job Address:				Property Code:				
City/Village:	Township:	County:	Zip	Zip Code:				
Between: And:								
. APPLICANT INF	ORMATION							
Applicant Name:		Address:						
City/Village:	Twp:	County:	County: Zip Code:					
Home Phone:	Wo	rk Phone:	Fax:					
. ZONING QUEST	TIONS							
What is the zoning di	istrict of the property?							
What is the proposed	d special land use?							
Will new construction	n or alteration of an exis	ting structure be required?		□ Y	ES		NO	
	USE QUESTIONS				\/=0			
•	nts be necessary to ade	equately serve the proposed Spe	cial Land		YES		NO	
Jse?			and Consist	$+$ \Box	YES		NO	
vviii additional or extr Land Use?	raordinary public service	es be required to serve the propo	sed Special		IEO	Ш	INC	
	nrovemente necessari	for the proposed Special Land U	se to meet	$+_{\Box}$	YES	П	NO	
zoning requirements		to the proposed opecial Land o	se to meet		1		140	
		nanner create any dangerous, in	iurious	$+$ \Box	YES		NO	
		s or conditions so as to adversel						
surrounding area or a			•					
Will the proposed Sp	ecial Land Use create r	oise, vibration, odor, air pollutior	n, glare,		YES		NC	
erosion, or other nuis								
"YES" to any of the	e above, please explai	n (add additional pages/docun	nentation as	neces	ssary)	•		
is the applicant's res		of any deed restrictions, subdivis						
egulations, and wetia nowledge and belief.		e information included in this forr	n are true to	ule Des	SCOLUT	ıy		
Signature:		Driver's License #	: Da	ite:				
oigiliatai o.		Diltoi o Elocitoc n	. 50					