

SPECIAL LAND USE REVIEW APPLICATION



132 E. Broad Street, P.O. Box 507, Linden, MI 48451
Phone: (810) 735-7980 Fax: (810) 735-4793

SECTION TO BE FILLED OUT BY APPLICANT

Applicant's Name: _____
Address: _____ City _____ State _____ ZIP _____
Phone: _____ Email: _____

Property Owner's Name: _____
Address: _____ City _____ State _____ ZIP _____

Property Address: _____ Property Tax #: _____
Zoning District: _____
Property Size: _____ acres OR _____ square feet
Description of Proposed Special Use: _____

In addition to this Special Land Use Application, the applicant is required to submit a Site Plan Application (Preliminary) along with a preliminary site plan prepared in accordance with Section 3.5.3 of the City of Linden Zoning Ordinance. The applications and supporting documents must be submitted and all fees paid at least 28 days prior to the next regularly scheduled Planning Commission meeting.

Special Land Use Application Fee: \$600
Preliminary Site Plan Application Fee: \$500
Escrow: A \$4,000 deposit will be required by the City to pay for consultants, engineers, traffic engineers, and/or the City Attorney to conduct reviews if needed. Additional fees may apply. All costs to review applications shall be paid by the owner or applicant.

INCOMPLETE SUBMITTALS WILL NOT BE ACCEPTED

I certify that the information given herein is true and correct to the best of my knowledge:

Signature of Applicant: _____ Date: _____

THIS SECTION FOR CITY USE ONLY

Fee Paid: _____ Date: _____
Referred to Planning Commission: _____ Public Hearing/Meeting Date: _____
Date Approved: _____ Denied: _____

Signature of Zoning Administrator: _____ Date: _____