

Official Use Only

Special Use Permit No. _____
Project Name _____
Total Sq. Ft. _____

Date Received _____
Received By _____
Action/Date _____

**TOWNSHIP OF MORAN
ZONING ADMINISTRATOR
PO BOX 364
ST. IGNACE, MI 49781**

SPECIAL USE PERMIT APPLICATION

A. Applicant: _____
Address of applicant: _____
Telephone Number: _____
Project Name: _____

B. Site address/location: _____
Current zoning district: _____
Legal description (attach if necessary): _____
Use for which permit is requested _____
Corresponding ordinance number _____

C. **Architect, Engineer or person responsible for design of project if different from applicant:**
Name _____
Address _____
Telephone _____
Contact person _____

D. **Site characteristics:**
Total acres of property _____
Acres in floodplain _____ Percent of total _____
Acres in wetland not in floodplain _____ Percent of total _____
Total dwelling units _____
Total units/acre _____
Dwelling unit mix
Number single family detached _____ for Rent Condo
Number duplex _____ for Rent Condo
Number townhouse _____ for Rent Condo
Number garden apt. style _____ for Rent Condo
Number other _____ for Rent Condo

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SPECIAL USE PERMIT APPLICATION (cont'd)

E. All Special Use Permit applicants must attach written answers to each of the following question as they relate to the proposed use:

1. Will be harmonious with and in accordance with the general objectives or with any specific objectives of the Township Master Plan of current adoption?
2. Will be designed, constructed, operated, and maintained so as to be harmonious and appropriate in appearance with the existing or intended character of the general vicinity and that such a use will not change the essential character of the same area?
3. Will not be hazardous or disturbing to existing or future neighboring uses?
4. Will be substantial improvement to property in the immediate vicinity and to the community as a whole?
5. Will be served adequately by essential public facilities and services, such as highways, streets, police and fire protection, drainage structures, refuse disposal or schools; or that the persons or agencies responsible for the establishment of the proposed use shall be able to provide adequately any such service?
6. Will not create excessive additional requirements at public cost for public facilities and services and will not be detrimental to the economic welfare of the community?
7. Will not involve uses, activities, processes, materials, and equipment and conditions of operation that will be that will be detrimental to any persons, property, or the general welfare by reason of excessive production of traffic, noise, smoke, fumes, glare or odors?
8. Will be consistent with the intent and purposes of the Townships Master Land Use Plan and Zoning Ordinance.

F. All information as indicated in the Zoning Ordinance for this special use must be submitted prior to the Commission reviewing this application for a permit.

G. Supporting Material (check if attached)

Approved Site Plan	_____
Proof of property interest	_____
Architectural sketches	_____
Soil borings	_____
Environmental Impact Study	_____
Other _____	_____

Signature of Applicant

Date

Fee

Received by and date