



Inkster, Michigan 48141

Planning Department

fax(313) 563-9760

PLANNING COMMISSION PETITION FOR SITE PLAN REVIEW/SUBDIVISION PLAT

TO THE INKSTER CITY PLANNING COMMISSION:

Case # \_\_\_\_\_ (SP)
Date Filed \_\_\_\_\_

The undersigned respectfully petition(s) Planning Commission for site plan review as provided for by the Inkster, Michigan Code of Ordinance and in support of this Petition, the following facts are shown:

PROPERTY IDENTIFICATION

Street Address: \_\_\_\_\_
The property is located on the \_\_\_\_\_ side of \_\_\_\_\_ Street, between \_\_\_\_\_ Street and \_\_\_\_\_ Street. It has frontage of \_\_\_\_\_ feet, a depth of \_\_\_\_\_ feet, and comprises \_\_\_\_\_ acres.
Legal Description:

ZONING - This property is currently zoned

Property Owner:

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

- Yes, I do authorize representatives of the City of Inkster to access the property for the purpose of site (initial) investigation associated with this application.

PROOF OF OWNERSHIP MUST BE ATTACHED TO THIS APPLICATION

PROPOSED USE

Clearly describe the proposed project - do not write "refer to plans": \_\_\_\_\_

\*ALL BUILDING MATERIALS MUST BE LABELED WITH PROJECT NAME OR CASE NUMBER & SUBMITTED TO THE PLANNING DEPARTMENT ALONG WITH SITE PLANS.

EIGHT (8) SETS OF SITE PLANS FOR COMMERCIAL DEVELOPMENT AND FOR RESIDENTIAL DEVELOPMENT, DRAWN AT A SUITABLE ENGINEERING SCALE SHOWING:

A sanitary sewer is not available, attach a letter from the Wayne County Health Department approving your proposed method).

ALL PRINTS MUST BE FOLDED.

SITE PLAN REVIEW FEES:

Table with 2 columns: Fee Category and Amount. Rows include Commercial - less than an acre (\$300), Commercial - an acre or more (\$450 + \$23 per acre), Residential - less than an acre (\$300 + \$5 per unit), and Residential - an acre or more (\$450 + \$5 per unit).

PLEASE NOTE - Partial acres are rounded off / on plans resubmitted for review 1/2 of the original fee. \*ALL REVISIONS MUST BE BUBBLED ON RESUBMITTED PLANS. AN 8.5" X 11" SITE PLAN OF FINAL ADMINISTRATIVELY APPROVED PLAN MUST BE PROVIDED FOR PLANNING COMMISSION MEETING. ALSO, A DIGITAL COPY OF FINAL PLAN ON CD-ROM SHOULD BE PROVIDED.

AFFIDAVIT OF PETITIONER

The undersigned Petitioner, being duly sworn, deposes and says that the statements and information herewith submitted are true and correct to the best of his/ her knowledge, information and belief; further, that s/he is authorized to submit this Petition.

Printed Name of Petitioner \_\_\_\_\_

Signature of Petitioner \_\_\_\_\_

Interest in Property \_\_\_\_\_

Firm \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_\_.

Notary Public, Wayne County, Michigan

My Commission Expires: \_\_\_\_\_