



**Frenchtown Charter Township**  
**Planning Commission**  
**2744 Vivian Road**  
**Monroe, MI 48162**  
**734-242-5900**

**SPECIAL USE APPLICATION**

Applicant must provide **13 copies** of the site plan, **13 copies** of the application, fees, escrow deposit, and all relative documents at least **5 weeks** prior to the next regularly scheduled meeting of the Planning Commission.

Refer to the document titled “Site Plan Submission Requirements” which contains detailed information related to the Site Plan and Development Review Process and the minimum information required for site plan submittals.

A public hearing will be required in which all owners of property within 300 feet of the proposed development will be notified and will be allowed to speak to the Planning Commission.

DATE _____	PROJECT ADDRESS _____
	PROJECT PARCEL ID _____

**APPLICANT INFORMATION**

<b>Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Cell:</b>	
<b>Email:</b>		

**PROPERTY OWNER INFORMATION**

<b>Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Cell:</b>	
<b>Email:</b>		

<b>PROPERTY DESCRIPTION</b>	
Zoning Classification:	
Lot Size:	
Description of Proposed Project:	
Present Use:	Proposed Use:

**Are you represented by an Architect or Engineer?** Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Architect / Engineer \_\_\_\_\_

Address \_\_\_\_\_

Telephone # ( \_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_ ) \_\_\_\_\_

**Are you represented by an Attorney?** Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Attorney \_\_\_\_\_

Address \_\_\_\_\_

Telephone # ( \_\_\_\_ ) \_\_\_\_\_ Fax ( \_\_\_\_ ) \_\_\_\_\_

**Will your attorney be present at the Planning Commission Meeting?** Yes \_\_\_\_\_ No \_\_\_\_\_

**ATTACH THE FOLLOWING:**

1. **13** hard copies of the site plan, sealed by a registered architect, engineer, or landscape architect. Please also provide an electronic copy via email to [kmcintyre@frenchtownmi.gov](mailto:kmcintyre@frenchtownmi.gov)
2. A brief written description of the existing and proposed uses, including but not limited to: hours of operation, number of employees on largest shift, number of company vehicles, etc.
3. If necessary, review comments of approval received from county, state, or federal agencies that have jurisdiction over the project.
4. One check to establish an escrow account with a beginning balance of **\$1,400** - \$400 for the Township Engineer and \$1,000 for the Township Planner. Any money left over at the end of the process will be refunded to the applicant.
5. One check in the amount of **\$50** - for the Planning Commission.
6. One check in the amount of **\$100** – for the Fire Inspector.

**SITE PLAN SUBMITTAL CERTIFICATIONS**

I certify that I have reviewed the Site Plan submittal documents and have compared it to the Site Plan Approval Criteria in Section 27.08 of the Zoning Ordinance of Charter Township of Frenchtown.

I further understand that all plans and correspondence for review have been submitted to the agencies listed below:

Monroe County Health Department  
Environmental Health Division  
29 Washington Street  
Monroe, MI 48161

Monroe County Drain Commission  
Attn: Doug Link  
1005 S. Raisinville Road  
Monroe, MI 48161

City of Monroe  
Attn: Barry Laroy  
120 E. First Street  
Monroe, MI 48161

Michigan Department of Transportation  
10321 E. Grand River Ave.  
Suite 500  
Brighton, MI 48116

Monroe County Road Commission  
840 S. Telegraph Road  
Monroe, MI 48161

**PLEASE NOTE:** The applicant or a designated representative **MUST BE PRESENT** at all scheduled review meetings or the site plan application may be tabled due to lack of representation.

Failure to provide true and accurate information on this application shall provide sufficient grounds to deny approval of a site plan application or to revoke any permits granted subsequent to site plan approval.

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**APPLICANT'S ENDORSEMENT**

All information contained herein is true and accurate to the best of my knowledge. I acknowledge that the Planning Commission will not review my application unless all information required in this application and the Zoning Ordinance have been submitted. I further acknowledge that the Township and its employees or agents shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

*Updated 12.26.19*