## ARLINGTON TOWNSHIP VAN BUREN COUNTY, MICHIGAN SPECIAL USE PERMIT RENEWAL APPLICATION



Date of Renewal Application:			
Parcel Addre	ess:		
Parcel ID No.		Existing Special Use Permit Approval Date:	
Specify Curr	ent Use of Property:		
Applicant:	[Name]		
	[Address]		
	[City, State and Zip Code]		
	[Contact Phone Number]	[Email]	
Owner: (If different)	[Name]		
	[Address]	· · · · · · · · · · · · · · · · · · ·	
	[City, State and Zip Code]		
	[Contact Phone Number]	[Email]	

**ATTACH SITE PLAN DRAWING (if required):** Article V, Section 5.02 of the Arlington Township Zoning Ordinance requires a site plan be submitted for any proposal to change, replace with a different use, add or recommence a use on an existing site, including expansions in area, volume or intensity of an existing use unless otherwise permitted by the ordinance.

**DEADLINE:** Sixty (60) days prior to expiration of the one (1) year Special Use Permit.

FEE DUE (with application): \$100.00.\*

Return Completed Form with Fee and Site Plan (if required) to:

Arlington Township 52022 34th Avenue Bangor, MI 49013

	Office Use Only	
PLANNING COMMISSION CONSIDERATION: January Quarterly Meeting	Site Plan Required? Y N Received? Y N Date Received: _	
April Quarterly Meeting July Quarterly Meeting	Assigned to:	_for review and report
October Quarterly Meeting Other Meeting Date:	Receipt letter sent to Applicant and Owner:	