

City of Farmington Hills
Planning Office
31555 W. Eleven Mile Road
Farmington Hills, MI 48336-1165
www.fhgov.com
(248) 871-2540
Fax: (248) 871-2521

Application for Special Approval

I (We) the undersigned, do hereby make application to the Planning Department of the City of Farmington Hills to split the property herein described as and in support of this application the facts below are shown. *Petitions must be filed with the Planning Office by 3:30 PM. on the 18th day of the month to be heard at the Regular Hearing of the following month. If the 18th falls on a weekend or holiday, plans must be submitted by 12:00 noon on the following business day*

REQUIREMENTS FOR APPLICATION SUBMITTAL

Eight (8) copies of Site Plan (ALL PLANS MUST BE FOLDED 8 1/2 X 11 LETTER SIZE ARCHITECTS SEAL UP)

Fifteen (15) reduced copies of Site Plan (11 x 17)

PROOF OF OWNERSHIP: Title Insurance; Purchase Agreement; Names of the Principal Owners involved in any Corporation, Partnership, etc.

HAZARDOUS SUBSTANCES FORM

Required Site Plan Fee – Base + \$135. Engineering + Acreage Fee..... Acres: _____ Total:: _____

NOTIFICATION OF AFFECTED PROPERTY OWNERS. When provision of the approval requires, all property owners within 300 feet of petitioner's property must be notified by first class mail five to fifteen days prior to the hearing. A mailing fee of \$200. is included in the base fee, if necessary, an additional \$1.25 for each notice sent over 25 notices will be billed.

Three (3) copies Tree Survey; plus (2) copies superimposed

Required Tree Survey Fee.....# of Trees: 6' or Larger: _____ Fee::..... _____

MAY BE REQUIRED AT A LATER DATE: Six (6) copies of Landscape Plan/Open Space Plan, plus Fifteen (15) (11 x 17) copies

Required Landscape Plan/Open Space Plan Fee: \$500.00 Minimum

SITE CHARACTERISTICS

Subject Property Address: _____

Subdivision and Lot # (if applicable): _____

Sidwell/Tax I.D.: #23-_____ Zoning District: _____

General Location of Site: _____

Proposed Use of Property: _____ Proposed Number of Employees: _____

Square Footage of Site: _____ Bldg. Sq. Footage/Number of Units: _____

THE PROPERTY IS OWNED BY:

Name: _____

Name: _____

Address: _____

Address: _____

City/State: _____ Zip: _____

City/State: _____ Zip: _____

Phone: _____

Phone: _____

Owner Signature: _____

Owner Signature: _____

e-Mail: _____

e-Mail: _____

APPLICANT:

Name: _____ Address: _____ e-Mail: _____

City/State: _____ Zip: _____ Phone: _____

Applicants interest in property (if other than the owner) _____

Signature of Applicant: _____

Reason for Special Approval: _____

Special Approval Hearing Date: _____ Decision of Planning Commission: _____

Action by Planning Commission: Approved: _____ Denied: _____

ITEM NO: _____ DATE: _____ RECEIVED/CHECKED BY PLANNING: _____