



**SPECIAL CONDITION USE APPLICATION**

101 E. Lake Street, Petoskey, MI 49770 (231) 347-2500 Fax (231) 348-0350

Case Number \_\_\_\_\_

Date Received \_\_\_\_\_

**APPLICANT INFORMATION**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Representing: \_\_\_\_\_

Special Condition Use Address: \_\_\_\_\_

Present Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

**SUBMITTAL REQUIREMENTS**

- 1) Completed Application
- 2) Narrative as to how request meets the Special Condition Use Standards (Section 1717)
- 3) Site Plan
- 4) Review Fee

**REQUIRED SITE PLAN INFORMATION**

\_\_\_\_\_ Site size                      \_\_\_\_\_ Adjacent Land Uses                      \_\_\_\_\_ Site Locator

\_\_\_\_\_ Existing site features including topography, vegetation, water features, existing structures, scenic views

\_\_\_\_\_ Proposed on-site traffic circulation and vehicle parking areas

\_\_\_\_\_ Access to adjacent streets and sidewalks or trails

\_\_\_\_\_ Location of any principal and accessory structures

\_\_\_\_\_ Landscaping Plan illustrating buffering and screening

\_\_\_\_\_ Scale, bulk, elevation, exterior materials and color of buildings

I, the undersigned, understand that all required information must be provided for the application to receive Planning Commission review. If the application is incomplete, it will be held until all required information is provided. I further authorize City staff and Planning Commission members to enter upon the site for which a special condition use is requested.

APPLICANT SIGNATURE \_\_\_\_\_

OWNER SIGNATURE (required if not applicant) \_\_\_\_\_