

**SIDNEY TOWNSHIP
MONTCALM COUNTY, MICHIGAN
REVIEW APPLICATION FORM**

Application for (check any that apply)

- | | |
|---|---|
| <input type="checkbox"/> Rezoning (see attached form) | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Special Land Use (see attached form) | <input type="checkbox"/> Land Division |
| <input type="checkbox"/> Site Plan Review | <input type="checkbox"/> Planned Unit Development |
| <input type="checkbox"/> Non-Use Variance (see attached form) | <input type="checkbox"/> Other _____ |

Applicant Information

Name _____
Phone _____
Address _____

Owner Information

Name _____
Phone _____
Address _____

Property Information

Address/Location _____
Parcel # _____
Zoning (Current) _____

Description of Proposed Use/Request (use other side or attach pages as needed)

I hereby attest that the information on this application form is, to the best of my knowledge, true and accurate.

Signature of Applicant

Date

Optional: I hereby grant permission for members of the Sidney Township (Planning Commission), (Zoning Board of Appeals), (Township Board) or (Zoning Administrator) to enter the above-described property for the purposes of gathering information related to the application. *Note to applicant: This permission is optional and failure to grant permission will not affect any decision on your application.*

Signature of Applicant

Date

Date Received _____

Fee Paid _____

Materials Received: Site Plans _____

Legal Description _____

Application accepted by _____