

KAWKAWLIN TOWNSHIP

APPLACATION FOR:

Site Plan Review _____
Special Use _____
Rezoning _____
Variance _____
Special Meeting _____

This Application will not be accepted if incomplete. All required material must be submitted at least ____ days prior to the next Planning Commission Meeting or ____ days prior to the next Board of Appeals meeting.

See Zoning Ordinance for specific requirements.
A preliminary site plan is required for all rezoning request.

APPLICATION INFORMATION (If different from owner)

Name _____ Phone _____
Address _____

OWNER INFORMATION

Name _____ Phone _____
Address _____

PROPERTY INFORMATION

Address _____ Parcel # 09-080- _____ Zoning District _____
Property Size _____ Property Description (photo copy)

DESCRIPTION OF PROPOSED USE/REQUEST (Use additional pages if necessary)

ABUTTING PROPERTY OWNERS (Township to attach list with names and addresses)

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

Applicants signature _____ Date _____

Material received: Site plan _____ Preliminary Building Plans _____ Other _____

DATE Received _____ Fee Paid \$ _____ Received by _____

SITE PLAN APPROVED Owner _____ Date _____ P.C. _____ Z.A. _____