



GRAND HAVEN CHARTER TOWNSHIP

SUBDIVISION PLAT REVIEW APPLICATION

(Includes Preliminary Plat review, Final Preliminary Plat review, and Final Plat review)

Application Type	Fee	Escrow*	Sewer Escrow**	
Original	\$300	\$500	Main Extension	\$5,000
Amendment	\$150	\$500	Lift Station	\$2,000

Note: for multi-phased developments, each phase after the original approval is considered an amendment

Applicant Information

Name _____

Phone _____ Fax _____

Address _____

Email Address _____

Owner Information *(If different from applicant)*

Name _____

Phone _____ Fax _____

Address _____

Property Information

Address/Location _____

Parcel Number 70 - - - - Size (acres) _____

Current Zoning _____ Master-Planned Zoning _____

Adjacent Zoning North: South: East: West:

Other Information

Proposed Subdivision Name: _____

Proposed Number of Proposed Lots? _____

Present Use of the Subject Property? _____

Number & Type of Existing Structures? _____

Does Property Abut Township Border? _____

Subject Property Located on a Paved Road? _____

Municipal Water within 2,700 Feet of Subject Property? _____

Municipal Sewer within 2,700 Feet of Subject Property? _____

NOTE: The architect, engineer, planner, or designer shall be responsible for utilizing the Township Ordinance Books and following the procedures and requirements set forth in Ordinance No. 310 (*Subdivision Control Ordinance*). Initially, submit five copies of the required information for staff review. Once staff has granted tentative approval, additional copies will be required as requested by staff.

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

Signature of applicant

Date

** To cover cost of legal and consulting fees, may be increased as necessary*

*** If approval of this application requires/includes the extension of a municipal sanitary sewer main, an additional \$5,000.00 escrow fee shall be required, and an additional \$2,000.00 escrow fee shall be required for the installation of a lift station.*

For Office Use Only

Date Received _____

Fee Paid? _____

Materials Received: Site Plans _____

Location Map _____

Survey _____

Legal Description _____

Dated copy of approved minutes sent to applicant? _____

Date Sent _____

PLANNING COMMISSION USE ONLY

Approval _____

Tabled _____

Denied _____

Conditional Approval _____

The following conditions shall be met for approval:

Signature of Planning Commission Chair

Date