



GRAND HAVEN CHARTER TOWNSHIP

SUBDIVISION PLAT REVIEW APPLICATION

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

Application Type	Fee	Escrow*
Plat Review	\$500	\$500

Utility Escrow**	
Main Extension	\$5,000
Lift Station	\$2,000

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 utility, an additional \$5,000 escrow fee shall be required, and an additional \$2,000 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