

**APPLICATION FOR PLANNED UNIT DEVELOPMENT**

**DELIVER TO:**

COHOCTAH TOWNSHIP HALL  
10518 ANTCLIFF RD

**OR**

**MAIL TO:**

COHOCTAH TOWNSHIP  
6950 OWOSSO RD  
FOWLERVILLE, MI 48836

NAME \_\_\_\_\_ APPLICATION DATE \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_ APPLICATION NUMBER \_\_\_\_\_  
TELEPHONE NUMBER \_\_\_\_\_ APPLICATION FEE \_\_\_\_\_

1. Legal description of the property \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Zoning District \_\_\_\_\_
3. Minimum Parcel Size as required by  
Sec. 14.02. \_\_\_\_\_
4. Proposed Special Uses under 14.02C \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Proposed principal uses for the project \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Does applicant desire a pre-application  
as provided by Sec. 14.04? \_\_\_\_\_
7. Will the project be developed in phases? \_\_\_\_\_
8. Name and address of the firm preparing  
the site plan. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Applicant acknowledges receipt of Article  
XIV of the Zoning Ordinance \_\_\_\_\_

XX of the Zoning Ordinance \_\_\_\_\_

11. Does the applicant anticipate the need  
for variances? \_\_\_\_\_

I/we hereby declare that all the above statements and information contained in this application and any attachments submitted herewith are true and accurate and I shall immediately inform Cohoctah Township in the event there is a change in any such information.

\_\_\_\_\_  
signature of applicant

\_\_\_\_\_  
signature of owner, if different from applicant

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**TOWNSHIP USE ONLY**

Date completed application received \_\_\_\_\_, by  
\_\_\_\_\_

Cohoctah Township Clerk

Date submitted to Planning Commission \_\_\_\_\_

Action taken: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Chairman signature \_\_\_\_\_ date \_\_\_\_\_

Secretary signature \_\_\_\_\_ date \_\_\_\_\_