



CITY OF GRAND LEDGE

Established 1893

Zoning Administrator

319 Taylor St.
Grand Ledge, MI 48837

Ph: (517) 627-6469

Fax: (517) 627-6788

sstachowiak@grand-ledge.com

Special Land Use Petition

For Office Use Only

Fee Paid _____

Date Received: _____

Petitioner(s) _____

Address _____

Daytime Phone _____

Evening Phone _____

Interest in Property (check one)

Owner

Option to buy

Represent Owner

Lessee

Other _____

Complete address of special land use _____

Current zoning: _____

Owner Name(s) _____

Address _____

Daytime Phone _____

Evening Phone _____

Legal Description (indicate attached if needed): _____

Lot size: Width _____ Length _____ Area _____

Proposed special land use _____

Petition must include photographs of the property, copies of any other required permits and a site plan, as follows:

- Drawn to a scale of at least 1"=100'
- Existing and proposed structures (buildings, trash receptacles, landscaping, etc.)
- Existing and proposed parking areas and driveways
- Existing and proposed roads, easements and other access points
- Flood plain elevations, if applicable

I stipulate and understand the special land use, if approved by the City of Grand Ledge, does not guarantee I may proceed with the special land use. I understand there may be additional permits required to meet trade codes and other governmental requirements, and I understand the City of Grand Ledge does not have any power or authority over these additional permits. I certify the statements made and the information provided in this sign permit application are true, accurate and complete.

Signature	Date				
Required Reviews					
	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"></td> <td style="width: 20%; text-align: center;">Approve Petition</td> <td style="width: 20%; text-align: center;">Deny Petition</td> <td style="width: 30%; text-align: center;">Initials</td> </tr> </table>		Approve Petition	Deny Petition	Initials
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<input checked="" type="checkbox"/> Zoning Administrator	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"></td> <td style="width: 20%; text-align: center;"><input type="checkbox"/></td> <td style="width: 20%; text-align: center;"><input type="checkbox"/></td> <td style="width: 30%; text-align: center;">_____</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	_____
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<input type="checkbox"/> City Assessor	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"></td> <td style="width: 20%; text-align: center;"><input type="checkbox"/></td> <td style="width: 20%; text-align: center;"><input type="checkbox"/></td> <td style="width: 30%; text-align: center;">_____</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	_____
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<input type="checkbox"/> Building Official	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"></td> <td style="width: 20%; text-align: center;"><input type="checkbox"/></td> <td style="width: 20%; text-align: center;"><input type="checkbox"/></td> <td style="width: 30%; text-align: center;">_____</td> </tr> </table>		<input type="checkbox"/>	<input type="checkbox"/>	_____
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