

SCHOOLCRAFT TOWNSHIP

**50 East VW Avenue
Vicksburg, Michigan 49097**

**(269) 649-1276
Fax: (269) 649-2232**

APPLICATION FOR SPECIAL LAND USE PERMIT

Applicant Name: _____ Date: _____

Applicant Address: _____
street city state zip

Phone: _____

Property Information

Property Owner (If different from applicant) _____

Property Address _____

Parcel NO. _____ Legal Description (obtain from deed or
tax bill) _____

Parcel size: _____ Zoning District _____

Special Land Use Permit Information

Specify the land use for which special land use approval is requested (e.g., Golf
Course, Bed & Breakfast, Child Day Care Center, etc.): _____

Attach all specifications, data, and other materials on which you intend to reply to
show all applicable standards for special land use approval are met. Also obtain a Site
Plan Review Application packet, and complete/file the required site plan materials.

NOTE: An application fee deposit of \$500.00 must accompany this application.
***Costs incurred over the application fee deposit amount will be billed at end of
application process; if deposit exceeds actual costs the balance will be refunded.**

Application to be filed with: Schoolcraft Township Clerk
50 East VW Avenue
Vicksburg, MI 49097

Signature of Applicant: _____ **Date:** _____

(For Township Use Only)

Deposit Fee Received By _____ Amount: _____

Date: _____

Tentative Hearing Date: _____