



# CHARTER TOWNSHIP OF COMSTOCK PLANNING & ZONING APPLICATION

Shipping: 6138 King Highway, Kal., MI 49048  
Mailing: PO Box 449, Comstock MI 49041-0449  
Phone: 269-381-2360 Fax: 269-381-4328

**PLEASE PRINT**

**PROJECT NAME AND ADDRESS:** \_\_\_\_\_

**APPLICANT:**

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Interest in the Property \_\_\_\_\_

**OWNER\*:**

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

\*If different

**NATURE OF REQUEST:** (Please check all the appropriate item(s))

- |                                 |                       |
|---------------------------------|-----------------------|
| Site Plan Review                | Rezoning              |
| Administrative Site Plan Review | Master Plan Amendment |
| Special Exception Use           | Text Amendment        |
| Site Condominium                | Variance              |
| Subdivision Plat Review         | Interpretation        |
| PUD/PURD/PMUD                   | Planning Escrow       |
| Other _____                     |                       |

**BRIEFLY DESCRIBE YOUR REQUEST** (Use Attachments if Necessary): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Township Use:
Fee:
\$ _____
Escrow:
\$ _____
Date Paid:
_____
cash/credit card
check # _____

LEGAL DESCRIPTION OF PROPERTY (Use Attachments if Necessary): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PARCEL NUMBER: 3907 - \_\_\_\_\_

ADDRESS OF PROPERTY: \_\_\_\_\_

PRESENT USE OF THE PROPERTY: \_\_\_\_\_

PRESENT ZONING: \_\_\_\_\_ SIZE OF PROPERTY: \_\_\_\_\_

**NAME(S) & ADDRESS(ES) OF ALL OTHER PERSONS, CORPORATIONS, OR FIRMS HAVING A LEGAL OR EQUITABLE INTEREST IN THE PROPERTY:**

Name(s)	Address(es)
_____	_____
_____	_____

**SIGNATURES**

*I (we) the undersigned certify that the information contained on this application form and the required documents attached hereto are to the best of my (our) knowledge true and accurate. By submitting this Planning & Zoning Application, I (we) grant permission for Comstock Township officials and agents to enter the subject property of the applicant as part of completing the reviews necessary to process the application. I (we) as Applicant(s), understand that I (we) am responsible for the reimbursement to the Township of its actual expenses in connection with my (our) application, under the Township's Escrow Fee Policy, and I (we) agree to pay such amounts under the terms of that policy.*

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Owner's Signature authorizing submission of Application**  
(\* If different from Applicant)

\_\_\_\_\_  
**Date**

**\*\* PLEASE ATTACH ALL REQUIRED DOCUMENTS \*\***

- Copies to:
- Planning & Zoning - 1
- Applicant - 1
- Treasurer - 1
- Assessor - 1
- Administrative Assistant - Original