

Village of Fowlerville

213 S. Grand Avenue
Fowlerville, Michigan 48836
Phone (517) 223-3771 Fax (517) 223-7435
www.fowlerville.org



Permit #: _____

PUD Waiver Request:

The filing of this application will facilitate the applicant appearing before the Planning Commission for the purpose of requesting a dimensional waiver from Planned Unit Development (PUD) requirements. All applicable sections of this application must be completed (please type or print).

Applicant Information

Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: _____	Email: _____	

Owner Information

Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: _____	Email: _____	

Waiver

Subject Parcel Address: _____
Subject Parcel Identification Number: _____ Current Zoning Classification: _____
Current Use(s) of Property: _____
Proposed Use of Property: _____
State the Article(s) and Section(s) of the Zoning Ordinance being appealed: _____
State the reason for the appeal (What are you attempting to do and why?): _____
A minimum of 15 copies of a clear sketch must accompany this application (where required). This sketch must be a minimum of 8 1/2" x 11" and show the property dimensions, all buildings existing or proposed on the site, the dimensions of all structures on the property, the location and size of other important property characteristics such as easements, setbacks, etc.

The fore stated information is true to the best of my knowledge and permission is hereby granted to allow Village employees and/or board members to enter upon the subject property for purposes of investigating this waiver request.

Applicant's Name: _____ Date: _____

Applicant's Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Receipt #: _____	Date Sent to Planner: _____	Date Completed: _____
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