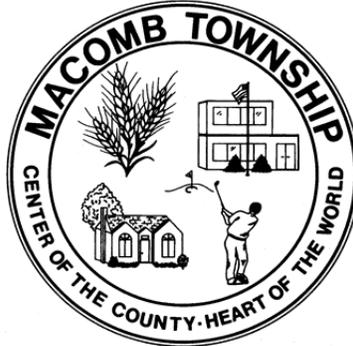


MACOMB TOWNSHIP

54111 Broughton Road • Macomb, MI 48042 • 586-992-0710 ext. 2276
www.macomb-mi.gov



APPLICATION PACKET FOR GROUND, TEMPORARY OR PORTABLE SIGNS

APPLICANTS TAKE NOTICE OF THE FOLLOWING:

All applications must contain each and every page from this application packet, including the checklist and any unused pages. If your application does not include all items, it will not be received by the Planning Department.

Please use only the forms provided with this application. No other forms, however similar, will be accepted.

The information contained herein represent requirements contained in the Macomb Township Zoning Ordinance #10

CHECKLIST OF DOCUMENTS REQUIRED FOR GROUND SIGN PERMIT

MACOMB TOWNSHIP PLANNING COMMISSION
54111 BROUGHTON ROAD
MACOMB, MICHIGAN 48042 (586) 992-0710 Ext. 2276

Please place a check mark in the box next to each item as you assemble the following required information. When complete, submit the completed application package to the Macomb Township Planning Department.

- One (1) completed Sign Application form, found on page 5.
- Payment of \$440.00 per ground sign application. Please make your check payable to '**Macomb Twp. Treasurer**' (**Funds are non refundable**).
- Sixteen (16) copies of site plan drawn to scale, tri-folded, signed and sealed. The site plan must be properly dimensioned and include buildings, parking spaces, property lines, maneuvering lanes, driveways, and the location of all utility lines within twenty (20) feet of the proposed ground sign. **NOTE:** The applicant is encouraged to use the latest approved site plan for the parcel as the base drawing for the site to be submitted.
- Sixteen (16) copies of details of sign(s), in both plan and elevation view, drawn to scale and accurately dimensioned depicting the location, size, type, heights, lighting, lettering, color, materials and construction. Please refer to §20-5 and §20-7 of the Code of Ordinances for specific sign standards.
- A Certificate of Zoning Compliance is required for the use for which the sign is being requested. **Please enclose a copy of the Certificate of Zoning Compliance with this application.**
- One (1) copy of Documentation Supporting the Request form, found on page 5. This page is optional for this application.
- One (1) completed Affidavit of Ownership form, found on page 7.
- One (1) completed Verification of Recorded Legal Property form, found on page 8. (**Applicant must have the Township Assessor verify the Legal Description**).
- One (1) complete Address Assignment Form with approved address for Ground, Temporary or Portable Signage from the Supervisor's Office, found on page 9. (**Applicant must have address issued by the Supervisor Office – Address Assignment Form attached or send request by Email to the Supervisors Office at supervisor@macomb-mi.gov**).
- One (1) completed Building Permit Application, found on page 10. **Please contact the Building Department regarding any questions you may have relative to Building Permit Application Fees (minimum of \$25.00). Such fees will be paid by the petitioner prior to the receipt of the permit.**
- One (1) completed Electrical Permit Worksheet and Application, found on pages 11 and 12. **Please contact the Building Department regarding any questions you may have relative to the Electrical Permit Worksheet and Application Fees. Such fees will be paid by the petitioner prior to receipt of the permit.**
- A separate check for the Building Permit Application and Electrical Permit Application Fee made payable to the **Macomb Twp. Treasurer (based upon the information completed on pgs. 10-12)**

**GROUND SIGN, TEMPORARY SIGN AND PORTABLE SIGN
APPLICATION REVIEW PROCESS**

- Step 1:** Applicant submits completed application (see checklist to determine if complete).
- Step 2:** Applications for ground, temporary and portable signs must receive approval from the Planning Commission (see §10.0319(B,3)). This may be as part of a Site Plan approval process, or as a separate application.
- Step 3:** The application is forwarded to various Township departments for review (*township policy*). Each department is asked to respond within 10 days, in writing with recommendations to approve, approve with conditions or deny the application to the Planning Department.
- Step 4:** If favorable reviews are received, the application is placed on the next available Planning Commission agenda for review, notices of which will be sent to owners and occupants of property within 300 feet of the subject property describing the nature of the request.
- Step 5:** The Planning Commission will review the application for conformance to the Zoning Ordinance regulations and will act accordingly to approve, approve with conditions or deny the application.
- Step 6:** If negative reviews are received and revisions to the plans are needed, the applicant will be notified of the requested changes. Once revised plans are received, they will be routed through the review process again to those requesting the changes (see Step 3).
- Step 7:** If the Planning Commission approves the sign, the applicant will be notified of the approval and their requirement to post a cash bond in the amount of \$500.00 to assure the construction of the sign as approved.
- Step 8:** When the bond is received, copies of the approved plans, any application forms submitted by the applicant, and a letter communicating the results of the Planning Commission meeting is forwarded to the Building Official for review, with copies sent to the applicant and property owner.
- Step 9:** The Building Department will then process the Building and Electrical Permit applications and will notify the applicant when permits are ready and any fees required. Depending on the workload of the Building Department, this may take up to an additional 5 business days to complete.
- Step 10:** The applicant will then pay for and pick up their Building and/or Electrical Permits and install the sign according to the approved plans. When complete, the applicant must present copies of the final inspection verifications to the Planning Department along with a written request to release the bond.
- Step 11:** The Planning Department will request the Finance Department verify the township is holding the bond and request the Building Department, Water and Sewer Department and the Township Engineer to inspect the sign to verify it was built according to the approved plans.
- Step 12:** If the departments above do not recommend release of the bond, the applicant will be notified of the items that require attention. Once the applicant has addressed all concerns, they must submit a letter indicating the issues have been addressed. The Planning Department will then forward the request for another review to those requesting the changes.
- Step 13:** If favorable reviews are received, the Planning Department will place the request on the next available Township Board agenda for release.
- Step 14:** Once the bond is released by the Township Board, the Finance Department is notified and a check is written and sent to the party that posted the bond.

ALL APPLICANTS TAKE SPECIAL NOTICE OF THE FOLLOWING:

1. **Zoning Standards.** Applicants should refer to the Macomb Township Zoning Ordinance for size, placement and other relevant standards. The Township Zoning Ordinance is available for viewing online at www.macomb-mi.gov
2. **Attendance Required at Public Hearing.** The Macomb Township Planning Commission requires the Applicant or the Applicant's Representative to be present at the Public Hearing, otherwise the item will be tabled to another meeting date.
3. **Planning Commission Policy Regarding Request To Table.** Should the petitioner request the tabling of a scheduled matter, an amount equal to one-half the original fee shall be charged. Said fee shall be remitted to the Township within two working days of the rescheduling of the matter. If the fees are not paid, the matter may be withdrawn from the agenda.
4. **Department Review.** Submittal of this application does not imply that the plans are acceptable, the review of the information by all departments and agencies will indicate if they are acceptable.
5. **Fees.** A fee of \$100.00 per ½ hour shall be charged for meetings with staff or planning consultant.
6. **Forms.** Please use only the forms provided with this application. No other forms, however similar, will be accepted.

**APPLICATION FOR GROUND SIGN PERMIT
MACOMB TOWNSHIP PLANNING COMMISSION
54111 BROUGHTON ROAD
MACOMB, MICHIGAN 48042
(586) 992-0710 Ext. 2276**

Only Complete Applications Will Be Accepted (PLEASE PRINT OR TYPE)

Permanent Parcel No. 08 - _____ - _____ - _____

Project Name: _____

Applicants Name: _____ Phone: _____

Address: _____ City: _____ Zip Code: _____

Address of Property: _____ Zone of Property: _____

(if different from applicants address)

(see Zoning Map of Macomb Twp.)

Applicants' Representative Name: _____ Phone: _____

(if different from applicant)

Address: _____

City: _____ State: _____ Zip Code: _____

Applicant's Signature: _____

Location of Property: _____

(for example: the north side of 23 Mile Road and ¼ mile east of Romeo Plank Road)

Property Frontage: _____ Feet and Depth: _____

Existing Land Use: _____

Are there other on-site identification(s) of business in question (either existing or planned)? Yes No

If "Yes" indicate the nature and location of said identification (Use Document Supporting the Request Sheet If additional space is needed) _____

Is the sign illuminated? If yes, state type and location (Use Document Supporting the Request Sheet if additional s

Space is needed) _____

New Sign(s) on Approved Site Plan

Revision of existing sign(s)

GROUND SIGN APPROVAL REQUEST

TYPE OF PROPERTY INVOLVED

CHECK ONE

CHECK ONE

Residential

Commercial

Single Use

Industrial

Office

Multiple Use (2 units or more)

Other

Shopping Center (50,000 sq. ft., 3 or more units)

TYPE OF SIGN REQUESTED

Ground

Shopping Center

Temporary/Portable

Pylon

Other _____

AFFIDAVIT OF OWNERSHIP

PLEASE TAKE NOTICE that an Affidavit of Ownership must be filed with all development and variance applications in Macomb Township. **Proof of ownership or interest in the property must be attached (i.e. deed, land contract, option agreement, lease, etc.).** This requirement must be fulfilled in order to promptly process your application.

If the applicant is not the free titleholder of the subject property, he/she is a purchaser according to _____, it is necessary to establish the fee title holder's intention
(Land contract, option, lease, etc.)

and desire to have the subject property receive Township approval.

(I), (We) _____, the undersigned fee title owner(s) of property
(name)

Hereinafter referenced, acknowledged (my) (our) agreement to permit/allow the property described within the attached application for _____ receive consideration by Macomb Township.
(type of application to be filed)

(I), (We) further authorize _____, as a (n) _____
(name of applicant) (recite applicant's interest in property)

of the property, to process an Application with the Township of Macomb on (my) (our) behalf.

(name) (owner)

(name) (owner)

(name) (owner)

(name) (owner)

THIS FORM RELATES TO PROPERTY WITH THE FOLLOWING PARCEL NUMBER:

08 - ____ - ____ - ____

STATE OF MICHIGAN
ss.
COUNTY OF MACOMB

On this _____ day of _____, 2_____, before me personally appeared _____
(name of applicant)

to me known to be the person(s) described in and who executed the foregoing instrument and acknowledged that

_____ executed the same as _____ free act and deed.
(he, she, they) (his, her, their)

Notary Public
Macomb County, Michigan
My Commission Expires: _____
Acting in Macomb County, Michigan

VERIFICATION OF RECORDED LEGAL PROPERTY

PROJECT NAME _____

Application To Be Filed (check off)

- | | | |
|---|---|---|
| <input type="checkbox"/> Variance | <input type="checkbox"/> Tentative Preliminary Plat | <input type="checkbox"/> Sign(s) |
| <input type="checkbox"/> Rezoning | <input type="checkbox"/> Final Preliminary Plat | <input type="checkbox"/> Certificate of Zoning Compliance |
| <input type="checkbox"/> Site Plan Approval | <input type="checkbox"/> Preliminary Plan Review | <input type="checkbox"/> Special Use Permit |
| <input type="checkbox"/> Final Plan Review | <input type="checkbox"/> Revised Site Plan | <input type="checkbox"/> House Move-on |
| <input type="checkbox"/> Other _____ | | |

PERMANENT PARCEL NO. 08 - ___ - ___ - ___

PUBLIC ROAD(S) FRONTAGE _____

ADDRESS OF PARCEL (if available) _____

OWNERS NAME _____

ADDRESS OF OWNER _____

**LEGAL DESCRIPTION
(INSERT HERE)**

Do Not Write Below This Line – Assessor’s Use Only

Is the property proposed for use properly recorded with Macomb Township? Yes No

COMMENTS:

Daniel Hickey, Township Assessor

APPLICATION FOR METER / OTHER ADDRESS ASSIGNMENT
MACOMB TOWNSHIP SUPERVISOR'S OFFICE
992-0710 x-2238

NAME OF PROJECT OR SITE: _____

Type of Request: ___ Electrical Meter ___ Water Meter ___ OTHER _____

Parcel ID #: 08-_____

Parcel Street Name:_____

NEAREST MAJOR CROSS STREETS/ROADS:_____

Owner:_____

Address:_____

PLEASE SUBMIT THE FOLLOWING INFORMATION TO THE SUPERVISOR'S OFFICE:

Site plan or sketch showing the following:

- a. Location of Meter / OTHER. (Please confirm it is on the correct road side)
- b. Indicate if it is a water meter or electrical meter, or OTHER (please list)
- c. If this is a water meter, you must have written approval from Water Department Superintendent verifying the location.

Submit to:

Fax: **(586) 992-0723**, Attn: Cynthia Paparelli, Supervisor's Office Or

Email: supervisor@macomb-mi.gov

Signature (print below)

Representing (Company)

NAME

Contact Address

Contact Phone Number

Email Address

Date Submitted

APPLICATION FOR BUILDING PERMIT

MACOMB TOWNSHIP

54111 Broughton Rd. Macomb, MI 48042
(586) 992-0710 Fax (586) 992-0720

BUILDING AND ZONING DEPARTMENT

Joseph G. Maples
Building Official

*PLANS ARE APPROVED SUBJECT TO COMPLIANCE WITH MACOMB TOWNSHIP ORDINANCES WHETHER MARKED OR NOT.
NOTE: ALL REQUIRED PERMITS MUST ACCOMPANY THIS SUBMISSION. APPLICATION FEES ARE NON-REFUNDABLE.

| | | | | |
|-----------------|-------|-------------|--------------|------------|
| Project Address | | Subdivision | | Lot Number |
| Property Owner | | | Address | |
| City | State | Zip | Phone Number | |

| | | | | |
|------------------------------|---|-----------------|--|----------|
| Contractor/Applicant Name | | | Last 4 Digits of Driver's License Number | |
| Contractor/Homeowner Address | | City | State | Zip Code |
| Phone Number | Last 4 Digits of Builder's License Number | Expiration Date | Email Address | |

| | | | | |
|---|---|--------------------------------------|--|--|
| Type of Project | | | | |
| <input type="checkbox"/> Single Family | <input type="checkbox"/> Attached Condo | <input type="checkbox"/> Apartment | <input type="checkbox"/> Commercial/Industrial | |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Repair | <input type="checkbox"/> Mobile Home | <input type="checkbox"/> Addition | |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Deck | <input type="checkbox"/> Accessory | <input type="checkbox"/> Ground Sign | <input type="checkbox"/> Wall Sign |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Pergola | <input type="checkbox"/> Gazebo | <input type="checkbox"/> In-ground Pool | <input type="checkbox"/> Above Ground Pool |
| <input type="checkbox"/> Other Description: _____ | | | | Estimated Cost \$ _____ |

| | |
|---|------|
| I hereby certify that the proposed work is authorized by the owner and that I am authorized by the owner to make this application as his authorized agent. I agree to conform to all applicable laws of the State of Michigan and Macomb Township. All information submitted on this application is accurate to the best of my knowledge. | |
| Section 23a of the state construction code act 1972, 1972 PA 230, MCL 125, 1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subject to civil fines. | |
| Applicant Signature | Date |

****DO NOT WRITE BELOW THIS LINE****

| | |
|---|--|
| Ind/Comm: 1st _____ sq. ft. Total _____ sq. ft. Residential Township Plan Code: _____ Living Area: 1st _____ 2nd _____ 3rd _____ Total Sq Ft: _____ Garage: _____ Bsmt: _____ Crawl: _____ Comments: _____ _____ _____ _____ _____ Application No: _____ Occupancy Load: _____ Construction Type: _____ Use Group: _____ Sprinkler System: [] Yes or [] No | Before permit is issued approval must be obtained from the following: Soil Erosion Permit: _____ Engineer Fee: _____ Project Valuation: _____ Permit Fee: _____ Approach Permit Required: _____ Plan Review Fee: _____ Total Due Fee: _____ |
|---|--|

Building Director: _____

ELECTRICAL PERMIT APPLICATION

MACOMB TO0710

Fax: 586-992-0720

AUTHORITY: ACT 230 PA 1972, as amended
COMPLETION: Installation shall not be started until application is filed.
PENALTY: Written order to stop construction

Date of Application _____

State Owned ____ YES ____ NO

JOB LOCATION

Name of Owner _____

Address/Job Location _____

CONTRACTOR/HOMEOWNER (permit application MUST be signed)

Has a building permit been obtained for this project?
____ Yes ____ No ____ Not Required

Contractor/Homeowner _____

Address _____ Phone _____

Federal ID # _____

MESC Employer # _____

(or reason for exemption)

Workers Comp Ins. Carrier _____

(or reason for exemption)

License # _____ Exp. Date _____

PLAN REVIEW REQUIRED
A plan review may be required before work is started on any building other than a single family dwelling less than 3,500 square feet. See below for details. Have plans been submitted for review?
____ Yes ____ No ____ Not Required

TYPE OF JOB
Single Family: _____ Remodel: _____
Special Inspection: _____ Service Only: _____
Manufactured Home: _____ Industrial: _____
Commercial: _____ Fire Alarm: _____
Sign: _____

APPLICANT SIGNATURE Section 23a of the State Constitution Act of 1972, Act No. 230 of the Public Acts, being Section 125.1523a of the Michigan Compiled Laws, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or residential structure. Violators of Section 23a are subject to civil fines.

Signature of Licensee or Homeowner

PLAN REVIEW REQUIREMENTS Plans and specifications for new construction work, alteration, repair, expansion, addition, or modification work shall be prepared by or under the direct supervision of an architect or engineer licensed pursuant to Act No. 299 of the Public Acts of 1980, as amended, and shall bear that architect's or engineer's signature and seal, A PLAN REVIEW IS REQUIRED BEFORE A PERMIT CAN BE ISSUED.

Exception 1: Alterations and repair work determined by the Electrical Inspector to be of a minor nature.

Exception 2: Work completed by a governmental subdivision or state agency costing less than \$15,000.00

Exception 3: A building containing not more than 3,500 square feet.

Exception 4: Wiring or alteration to an electrical system that costs less than \$10,000.00 unless requested by administrative authority.