

MACOMB TOWNSHIP

54111 Broughton Road • Macomb, MI 48042

Planning Department

586-992-0710 x2276

www.macomb-mi.gov



APPLICATION PACKET FOR:

PLANNED UNIT DEVELOPMENT --- CONCEPT REVIEW

APPLICANTS TAKE NOTICE OF THE FOLLOWING:

All applications must be complete. If your application does not include all items, it will not be received by the Planning Department.

CHECKLIST OF DOCUMENTS REQUIRED TO COMPLETE THIS APPLICATION:

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.

- Completed Application** - Seventeen (17) copies of the completed application (Page 5), plus the signed original.
- Payment** - Please make your check payable to '**Macomb Twp. Treasurer**' (**Non refundable**)
PUD Concept Review (PUD-C): \$1,819.00
- Site Plan(s)** - Seventeen (17) copies on 24" x 36" sheet(s).
- Floor Plan(s)** - Seventeen (17) copies of general floor plan(s), if applicable.
- Elevation Drawing(s)** - Seventeen (17) copies of architectural elevation drawing(s), if applicable.
- Landscape and Lighting Plan(s)** – Seventeen (17) copies of landscape and lighting plans, if applicable.
- Electronic Media Storage Copy** – Electronic Site Plan(s), Floor Plan(s), Elevation Drawing(s), and Landscape and Lighting Plan(s) in an electronic (.PDF) format.
- One (1) copy of the **Documentation Supporting the Request Form**, found on page 6.
- One (1) original copy of **Affidavit of Ownership Form**, found on page 7.
- Two (2) copies of **proof of interest in the property** (i.e. deed, land contract, lease, purchase option, etc.)
- One (1) original copy of the **Verification of Recorded Legal Property Form**, found on page 8. This form **MUST** be signed by the Township Assessor.

PUD Concept Review Process

- Step 1:** Applicant submits a completed PUD Concept Application package.
- Step 2:** Copies of the application and design drawings are sent to the Planning Department heads for review and recommendation. The reviews shall be provided to the applicant and Planning Commission.
- Step 3:** The item will then be placed on the next available Planning Commission agenda for discussion and the Planning Department will notify the applicant of the meeting date.
- Step 4:** During the meeting, the Planning Commission shall provide comments with regard to the project. Such commentary may include, but is not limited to, use compatibility, aesthetics, safety, potential off-site impacts and similar type issues.
- Step 5:** After discussion, the Commission may ask the applicant to return with additional information for further discussion or to proceed with the submission for the formal "Application" Phase of the PUD. **NO DECISION(S) WILL BE MADE WITH REGARD TO THE PROJECT.**

ALL APPLICANTS TAKE NOTICE OF THE FOLLOWING:

- **Attendance Required.** The Planning Commission requires the Applicant or a Representative to be present at the meeting, otherwise the item will be tabled to another meeting date.

- **Policy Regarding Request to Table.** Applicants requesting to be tabled or that are tabled due to absence at a meeting may be charged an amount equal to one-half the original fee.

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

- **Application Processing; Placement of Issue on Planning Commission Agenda.** The review process as described herein will govern the timing of the application.

Application for Planned Unit Development
Concept Plan Review

MACOMB TOWNSHIP PLANNING COMMISSION
54111 Broughton Road
Macomb, Michigan 48042
(586) 992-0710 EXT. 2276

Parcel Number 08 - ____ - ____ - ____ - ____ - ____

Project Name _____
(if applicable)

Applicant's Name: _____ Phone _____

Address: _____ E-Mail _____

City: _____ State: _____ Zip Code _____

Applicant's Signature _____

Representative Name: _____ Phone _____
(if different from applicant)

Address: _____ E-Mail _____

City: _____ State: _____ Zip Code _____

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

Property Frontage (in feet) _____ Property Depth _____ Acreage _____

Present Zoning Classification _____

Existing Land Use _____

Legal Owner of Property _____ Phone _____
(Print Owner's Name)

Address: _____ E-Mail _____

City: _____ State: _____ Zip Code _____

VERIFICATION OF RECORDED LEGAL PROPERTY

PARCEL NUMBER 08 - ____ - ____ - ____ - ____

PUBLIC ROAD(S) FRONTAGE _____

ADDRESS OF PARCEL (if available) _____

OWNERS NAME _____

ADDRESS OF OWNER _____

LEGAL DESCRIPTION

(Please print or type the description here or attach hereto. Please indicate if the description is attached.)

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