

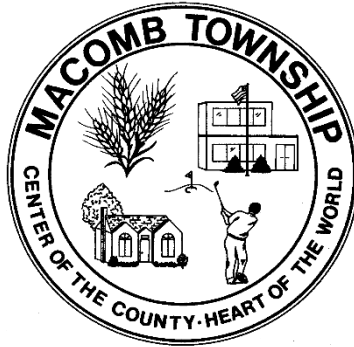
# MACOMB TOWNSHIP

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54111 Broughton Road • Macomb, MI 48042 •  
586-992-0710 Ext. 7103

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[www.macomb-mi.gov](http://www.macomb-mi.gov)



APPLICATION PACKET FOR:

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## CONDITIONAL REZONING

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**APPLICANTS TAKE NOTE 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 reviewed by the Planning Department.

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

## CONDITIONAL REZONING APPLICATION

### CHECKLIST OF REQUIRED DOCUMENTS

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This application must be accompanied by all items listed in the checklist below. This application shall be completed and submitted with proper payment (as indicated in the application) in an envelope stating “Attention: Planning Department,” the project name, and type of project on the outside of the envelope and placed in the night drop off box at the back of the building at Macomb Township Town Hall at 54111 Broughton Road, Macomb Township, MI 48042 (alternatively the package can be dropped off with the Planning Department at Town Hall, or mailed to this address). No plans or supplemental information is required with the submittal of the check, just the application. In addition to this hard copy submittal, **A PDF OF THE APPLICATION, A COPY OF THE CHECK, AND ANY/ALL PLANS AND SUPPLEMENTAL INFORMATION MUST BE EMAILED TO [PlanDropbox@macomb-mi.gov](mailto:PlanDropbox@macomb-mi.gov)**. Once the package is received and we have verified confirmation of payment, the submittal will be reviewed. If additional information is required, Planning Department staff will contact you via email or phone with additional instructions or requests.

- A completed application**, we will not accept incomplete applications or missing pages;
- Payment** – please make your (non-refundable) check payable to “**Macomb Township Treasurer**”. Payment for Conditional Rezoning Review is \$2,400.00, plus \$20.00 for each additional acre over two (2) acres. Payment must be mailed in or brought in to Macomb Township offices with the original application. Failure to do so will delay the review process;
- A copy of **proof of interest** in the property (i.e. deed, land contract, lease, purchase option, etc.);
- Location of the parcel**. One (1) original fine-line, black ink drawing showing the parcel(s) proposed for rezoning in relation to the nearest street or U.S. Government section corner;
- Advisement of availability of water lines and sewer lines to the land;
- Letter**, describing in detail the purposed use of the property
- Statement of Conditions document;
- A written statement prepared by the applicant that includes a confirmation that the conditional rezoning agreement was proposed by the applicant and entered into voluntarily. The statement should also confirm that the applicant is understanding of an in agreement that the property shall not be developed in a manner that is inconsistent with the conditions placed on the conditional rezoning.

#### **ALL APPLICANTS TAKE SPECIAL NOTICE OF THE FOLLOWING:**

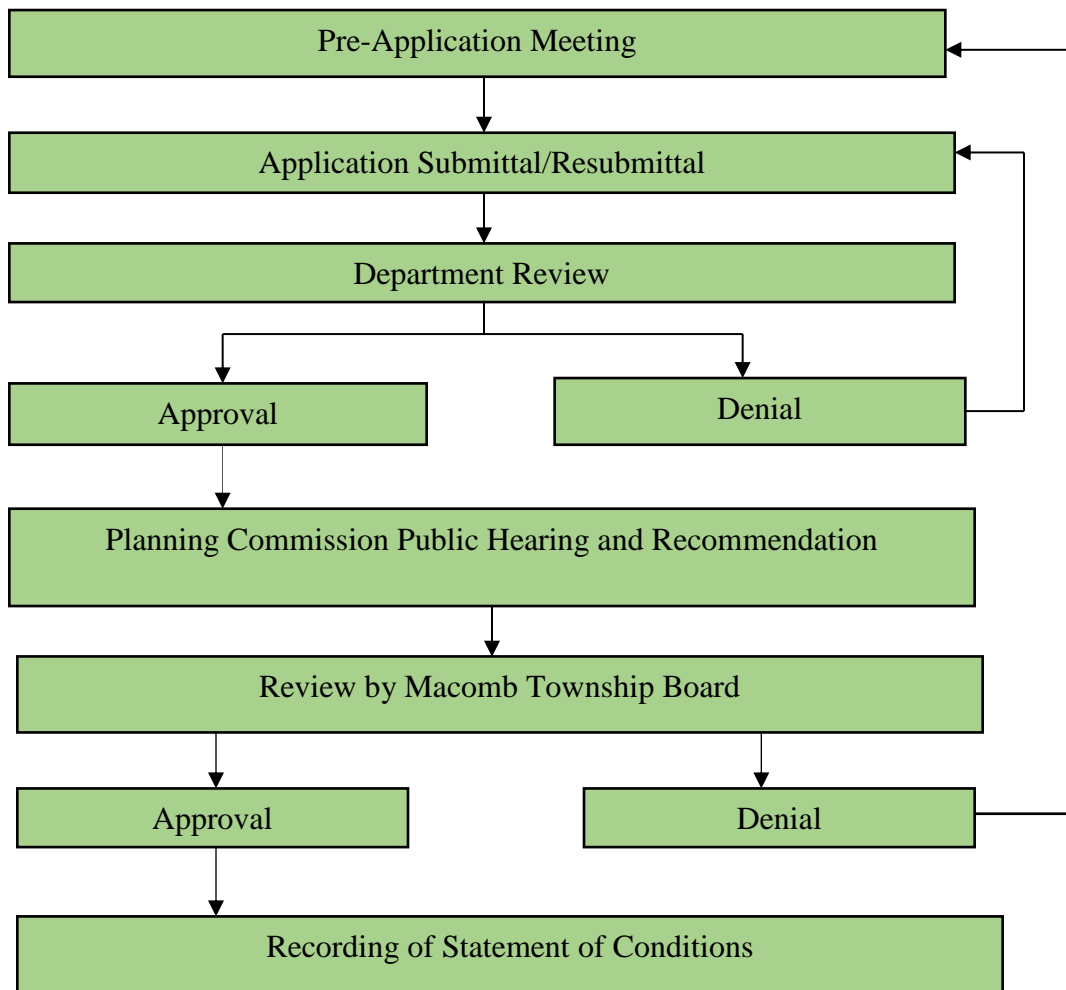
**Time Charge for Planning Consultant.** In some instances, the use of outside consultants may be needed, and if deemed necessary, their hourly rate may be added to the review fee.

# CONDITIONAL REZONING APPLICATION

## OVERVIEW

**What is a Conditional Rezoning?** A conditional rezoning request with a voluntary offer of conditions attached. As part of a rezoning request, an owner of property may voluntarily offer in writing, and Township Board may approve, certain use and development of land as a condition to the approval of a rezoning. An offer of conditions submitted as part of a conditional rezoning request shall bear a reasonable and rational relationship to the property for which rezoning is requested. Condition rezoning requests are subject to Section Sec. 10.2401 of the Macomb Township Zoning Ordinance and all applicable sections of the Michigan Zoning Enabling Act (M.C.L. 125.3101 *et seq*).

**What are the procedures for requesting a Conditional Rezoning?** A pre-application meeting is mandatory and there is a \$300.00 fee. Upon receipt of a complete application for conditional rezoning, the Planning Department will send copies of the application to the appropriate department heads for review and recommendation. Results of the review shall be communicated to the applicant. These departments will be given ten (10) days for review. The Planning Commission will hold a public hearing, at which your presence will be mandatory, review the request and make a recommendation to the Township Board. The Township Board has final authority to approve or deny the request for conditional rezoning. Applicants should note that changes to conditional rezoning prior to Township Board approval may result in additional public hearings.



**CONDITIONAL REZONING REVIEW APPLICATION**

**APPLICATION**

**MACOMB TOWNSHIP PLANNING COMMISSION  
54111 BROUGHTON ROAD  
MACOMB, MICHIGAN 48042  
(586) 992-0710 EXT. 7103**

**Permanent Parcel Number 08 -** \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Representative Name: \_\_\_\_\_ Phone \_\_\_\_\_  
(if different from applicant)

Address: \_\_\_\_\_ Email \_\_\_\_\_

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) \_\_\_\_\_ Depth \_\_\_\_\_ Acres \_\_\_\_\_

Current Zoning Classification \_\_\_\_\_

Requested Zoning Classification \_\_\_\_\_

The requested zoning is proposed in order to accommodate the following uses(s) \_\_\_\_\_

Attach the completed "Statement of Conditions" using the Township approved format. This format will be provided at the pre-application meeting.

**CONDITIONAL REZONING REVIEW APPLICATION**

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**VERIFICATION OF RECORDED LEGAL PROPERTY**

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**PROJECT NAME** \_\_\_\_\_

**PERMANENT PARCEL NO. 08** - \_ \_ - \_ \_ - \_ \_ .

**PUBLIC ROAD(S) FRONTAGE** \_\_\_\_\_

**ADDRESS OF PARCEL (if available)** \_\_\_\_\_

**OWNERS NAME** \_\_\_\_\_

**ADDRESS OF OWNER** \_\_\_\_\_

**LEGAL DESCRIPTION  
(INSERT HERE)**