



4980 Shattuck Road, Saginaw, MI 48603 (989) 791-9865
Fax: (989) 791-9859

APPLICATION FOR SPECIAL USE PERMIT (FEE \$350.00)

Applicant: _____ Date: _____

Address: _____

Telephone: _____ Fax: _____

Applicant's Signature: _____

Owner (If Different Than Applicant): _____

Address: _____

Telephone: _____ Fax: _____

Owner's Signature: _____

Property Address: _____

Legal Description: (Provide the legal description Of the property affected - If additional space is needed, please attach on a separate sheet to this application:

Proposed Use: _____

This application must be filled out completely and returned to the Community Development Department no less than thirty (30) days prior to a scheduled Planning Commission hearing.

Office Use Only: Date Filed: _____ Amount Paid: _____

Case Number: _____ Hearing Date: _____

Tax Identification Number: _____

Current Zoning: _____