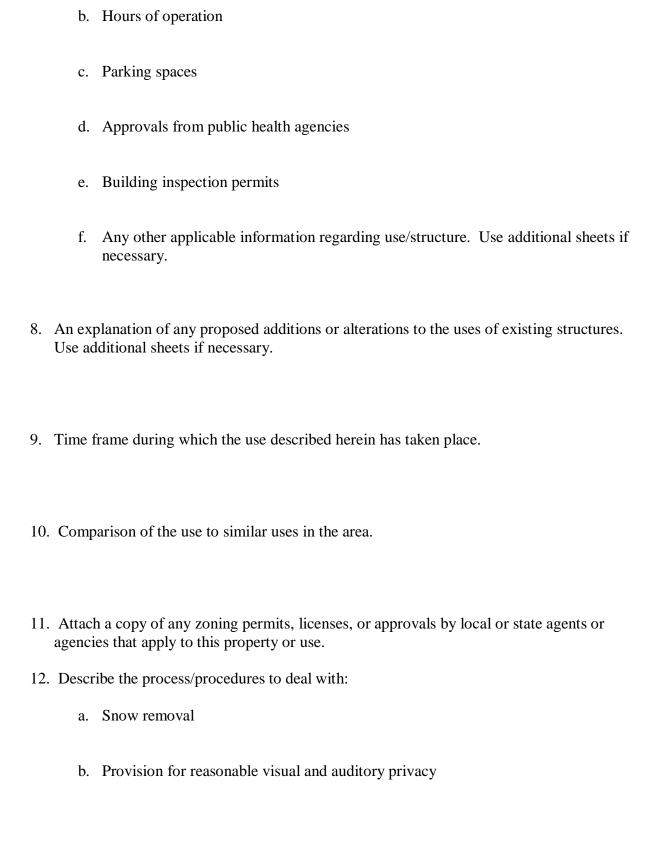


## TOWNSHIP OF MUNISING CONDITIONAL USE PERMIT APPLICATION

Please complete the application, include a check in the amount of \$200.00, payable to Munising Township, and mail to the following:

Township of Munising PO Box 190 Wetmore, MI 49895 Michael Tietjen (906) 573-3333 muntwpza@jamadots.com

- 1. Conditional Use Request
- 2. Zoning District of Property
- 3. Name and Address of Property Owner and Applicant if not the same
- 4. Physical Address of Property [if different than above]
- 5. Legal Description of property/lot. Attach a copy of the deed showing the date the current owner(s) purchased the property.
- 6. Attach a site plan drawn to scale with a north arrow see regulations Sections 1103 or 1104 as applicable.
- 7. Describe the proposed/existing use/structure(s). Include all necessary information such as:
  - a. Number of occupants per rental period



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Print Own	er's	Name		
Signature o	of C	Owner	<u></u>	Date
inspect the structures	pro and	d submitting this application you operty at reasonable times, evaluativities on site related to this waship Planning Commission or	ate the use and application and	take audio/visual evidence of the any permission issued by the
	d.	Parking of customers' vehicles	s and/or trailers.	Use additional sheets if necessary.
	c.	Areas for storage of trash		

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## DO NOT WRITE BELOW THIS LINE

Conditional Use Permit: <b>APPROVED</b> / <b>DENIED</b>		
Conditional Use Permit Number (if approved):		
Conditions:		
1.		
2.		
3.		
4.		
5.		
Chair, Munising Township Planning Commission	Date	

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