

**CHARTER TOWNSHIP OF COMMERCE
APPLICATION FOR SITE PLAN REVIEW**

SP#	Initial Deposit: Twp.	Giffels
FOR OFFICE USE ONLY		

Development Name: _____ **Date:** _____

Property/Address Location _____

Present Use _____ Proposed Use _____

Sidwell# _____ Property Dimensions _____ Area of Property _____

Gross Square Feet of Building _____ Number of Buildings/Lots _____

Water Source Public System Private/Well

Waste Disposal Public System Private/Septic

Does this project involve an extension of the Municipal Water/Sewer systems? _____

Applicant's Name: _____

Address: _____ City, State, Zip _____

Phone: _____ Work _____ Cell _____

E-Mail _____ Fax: _____

Owner's Name: _____

Address: _____ City, State, Zip _____

Phone: _____ Work _____ Cell _____

E-Mail _____ Fax: _____

Site Plan Prepared By: _____

Address: _____ City, State, Zip _____

Phone: _____ Work _____ Cell _____

E-Mail _____ Fax: _____

I hereby grant Commerce Township personnel involved with the review of this request, permission for reasonable entry onto the above property for investigations specifically related to this request.

Applicant Signature _____ Date _____

Print name _____

Owner Signature _____ Date _____

Print name _____