

**BIRCH RUN TOWNSHIP**  
**APPLICATION FOR SPECIAL USE PERMIT**

DATE: \_\_\_\_\_ SPECIAL USE REQUEST NO: \_\_\_\_\_

TO: BIRCH RUN TOWNSHIP PLANNING COMMISSION

BY: \_\_\_\_\_  
Name of Applicant

OF: \_\_\_\_\_  
City State Zip  
\_\_\_\_\_  
Phone Number

1. The property in question is located at:

\_\_\_\_\_  
Address City State Zip

Legal Description: (Enter here or attach):

\_\_\_\_\_  
\_\_\_\_\_

2. A previous request has ( ) has not ( ) been made with respect to this property.  
Dated \_\_\_\_\_ 20 \_\_\_\_\_. Decision of previous request:

\_\_\_\_\_  
\_\_\_\_\_

3. The appeal with regard to a special use permit is as follows: (Check applicable item)

\_\_\_\_(A) To hear and decide application(s) for special use permit(s) to  
Regulations in accordance with Article \_\_\_\_\_

\_\_\_\_(B) To hear and decide whether another proposed use is in accord with the  
intent and purpose of the regulations regarding zoning district  
\_\_\_\_\_ as found in Article \_\_\_\_\_ of this  
Zoning Ordinance.

4. With regard to the above request, I (we) apply for the following specific special use:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. I (we) authorize \_\_\_\_\_  
To act as my (our) authorized agent in the hearing on my (our) request. (You may attach  
Supplementary information on your request).

Signed, \_\_\_\_\_

To be completed by Township:

Fee \$750.00      Date Received: \_\_\_\_\_

Check # \_\_\_\_\_      Cash \_\_\_\_\_

Copy Sent To:

Zoning Administrator \_\_\_\_\_, 20\_\_\_\_

Township Planning Comm. \_\_\_\_\_, 20\_\_\_\_

Saginaw County Planning \_\_\_\_\_, 20\_\_\_\_

Property is presently zoned \_\_\_\_\_

Property is shown on Master Plan as \_\_\_\_\_

Action Taken:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed, \_\_\_\_\_