



Planning & Zoning Application

REV 12/16/19

APPLICANT INFORMATION

Applicant _____ Phone _____

Address _____ Fax _____

City, State _____ Zip _____

Email _____ Cell Phone Number _____

Property Owner _____ Phone _____

(if different than applicant)

Address _____ Fax _____

City, State _____ Zip _____

Billing Contact _____ Phone _____

Address _____ Fax _____

City, State _____ Zip _____

SITE/PROJECT INFORMATION

Name of Project _____

Parcel ID No. _____ Project Address _____

Attach Legal Description of Property

Property Location: On the _____ Side of _____ Road; Between _____ Road and _____ Road. Size of Lot: Width _____ Depth _____

Acreage of Site _____ Total Acres of Site to Review _____ Current Zoning of Site _____

Project Description: _____

Is a re-zoning of this parcel being requested? (If yes, complete next line) YES NO

Current Zoning of Site _____ Requested Zoning _____

SPECIAL PERMIT INFORMATION

Does the Proposed Use Require Special Approval? (If yes, complete next line) YES NO

Section of Zoning Ordinance for which you are applying _____

Applicant Signature _____

Date _____

In addition to city fees, projects will be charged an escrow amount based on the estimated cost of outside consultant review.

Per Hamtramck City Ordinance 21-01, Chapter 121, §121.003, the City of Hamtramck is not accepting applications for any new Marijuana related businesses.

নথিপত্র বা দলিল পত্র গুলি সম্পূর্ণ করতে বা বোঝার জন্য অনুবাদ পরিষেবার দরকার হলে অনুরোধ করতে বিভাগীয় প্রধানের সাথে যোগাযোগ করুন।

إذا كانت هناك حاجة إلى خدمة الترجمة لأكمال المستندات أو فهمها، الرجاء التواصل بإدارة القسم لطلب المساعدة