



**TSEGO  
TOWNSHIP**

EST 1833

- \_\_\_\_\_ PLANNED UNIT DEVELOPMENT
- \_\_\_\_\_ SITE CONDOS
- \_\_\_\_\_ PLANNED RESIDENTIAL DEVELOP.
- \_\_\_\_\_ PRELIMINARY PLAT

P.C. Case Number
Date
Parcel I.D. Number

Property Owner(s) Name	Applicant(s) Name
Mailing Address	Mailing Address
City, State, ZIP	City, State, ZIP
Phone	Phone

This application must be signed by the property owner(s). In lieu of a signature on this application, the owner may provide a letter authorizing the applicant to act on his/her behalf. This application will not be processed until authorized by the property owner.

Name of Proposed Development	Brief Description of Proposed Land Use:	
Estimated Total Cost of Project		
Location of Property		
Address _____		
N S E W Side of _____ Road	Current Zoning of Parcel	Number of Sites To Be Created
between _____ & _____ Roads		
Total Acreage of Existing Site	Number of Acres To Be Developed	Zoning of Surrounding Parcels North: _____ South: _____ East: _____ West: _____

Please list addresses of individual lots and roads to be included:

List any private restrictions that encumber the property or its uses (enter "none" if none exist):

Submit a scale drawing of the property showing boundaries and location:

Submit copies of site plan, if applicable

I, the undersigned, acknowledge that approval of this Site Plan constitutes an agreement with the Township of Otsego, that all improvements and obligations must be developed in strict compliance with the approved Site Plan and any amendments or conditions imposed shall be completed within the time specified under the Site Plan Review.

Signature of Land owner/property owner \_\_\_\_\_ Date \_\_\_\_\_

Owner(s) Signature	Date
Applicant(s) Signature (if other than owner)	Date

**DO NOT WRITE BELOW THIS LINE - TOWNSHIP USE ONLY**

Application Fee	Date Received and by	Receipt Number	
Date Notices Mailed	Public Hearing Date		
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Approved with Conditions (list below or attach): _____ Date _____			
Signature Zoning Administrator		Date	