

HOWELL TOWNSHIP
3525 BYRON ROAD, HOWELL, MI 48855
Phone: 517-546-2817 ext. 108
E-mail: inspector@howelltownshipmi.org
REQUEST FOR AMENDMENT TO APPROVED SITE
PLAN REVIEW

SUBMIT \$350.00 FEE WITH APPLICATION:
A REPRESENTATIVE OF HOWELL TOWNSHIP WILL REVIEW THE SUBMITTED
APPLICATION

FEE: _____ PAID: _____ DATE: _____ RECEIPT #: _____

PARCEL ID# 4706 ____ - ____ - ____ PRESENTLY ZONED: _____

NAME/TITLE OF APPLICANT: _____

PROPERTY OWNER OR BUSINESS NAME: _____

ADDRESS: _____

PHONE: () ____ - ____ FAX: () ____ - ____

TYPE OR NATURE OF BUSINESS: _____

CONTACT ADDRESS: _____

PHONE: () ____ - ____ FAX: () ____ - ____

LOCATION OF PROPERTY INVOLVED: _____

STATE BRIEFLY A DESCRIPTION OF THE AMENDMENT AND MINIMUMS
REQUIRED. ATTACH DRAWINGS OR OTHER PERTINENT INFORMATION YOU
WANT REVIEWED: _____

DATE: _____ SIGNATURE: _____

PRINT NAME: _____

TOWNSHIP NOTES: _____

