HOWELL TOWNSHIP REQUEST FOR PRE-CONFERENCE

3525 Byron Road Howell, MI 48855 Phone: 517-546-2817 ext. 108 Email: inspector@howelltownshipmi.org

| PARCEL ID# 4706 | _ - | DATE: |
|--|----------------|-------|
| NAME /TITLE OF APPLICANT: _ | | |
| BUSINESS NAME: | OWNER: | |
| ADDRESS: | | |
| PHONE: | E-MAIL | |
| TYPE OR NATURE OF BUSINESS: | | |
| | | |
| | | |
| LOCATION OF PROPERTY: | | |
| STATE BRIEFLY THE REASON FOR PRE-CONFERENCE: | | |
| | | |
| | | |
| | | |
| CHECK PERSON(S) REQUESTED TO ATTEND: | | |
| TOWNSHIP PLANNER \$350 PER HOUR | | |
| TOWNSHIP ENGINEER – AS BILLED | | |
| MAKE CHECK PAYABLE TO HOWELL TOWNSHIP | | |

CHECK MUST BE RECEIVED **PRIOR** TO MEETING