

**HOWELL TOWNSHIP**  
**3525 BYRON ROAD, HOWELL, MI 48855**  
**Phone: 517-546-2817 ext. 108**  
**E-mail: inspector@howelltownshipmi.org**  
**REQUEST FOR PRE-CONFERENCE**

PRESENTLY ZONED: \_\_\_\_\_ PARCEL ID# 4706\_\_\_\_-\_\_\_\_-\_\_\_\_

NAME /TITLE OF APPLICANT: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: ( )\_\_\_\_-\_\_\_\_ FAX: ( )\_\_\_\_-\_\_\_\_

TYPE OR NATURE OF BUSINESS: \_\_\_\_\_

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

LOCATION OF PROPERTY INVOLVED: \_\_\_\_\_

STATE BRIEFLY THE REASON FOR BEING HEARD: \_\_\_\_\_

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

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

CHECK PERSON(S) REQUESTED TO ATTEND:

- \_\_\_\_\_ TOWNSHIP PLANNER **\$350 PER HOUR**
- \_\_\_\_\_ TOWNSHIP ENGINEER – **AS BILLED**

MAKE CHECK PAYABLE TO HOWELL TOWNSHIP **PRIOR** TO MEETING

TOWNSHIP NOTES: \_\_\_\_\_

\_\_\_\_\_

PAID: \$ \_\_\_\_\_ DATE: \_\_\_\_\_ CHECK #: \_\_\_\_\_