

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 #: _____