



Administrative Site Plan Review Application

4243 Remembrance Rd., N.W.
Walker, MI 49534

Walker City Staff Contact:

Paula Priebe

Planning Director (616) 791-6879

ppriebe@walker.city

**ALL SUBMITTED PLANS MUST BE FOLDED
ROLLED PLANS WILL NOT BE ACCEPTED.**

Please check nature of request

- ☐ Change to an approved site plan (94-287)
- ☐ Non-Residential building addition not exceeding 25% existing floor area OR 5,000 SF, whichever is less (94-278)
- ☐ Parking Lot addition
- ☐ Minor modification to an approved FASP (94-213(10)b.4)

Section A

Name of Proposed Development:

Address(es) of Project:

Permanent Parcel Number(s): PLEASE ATTACH LEGAL DESCRIPTION(S)

Current Zoning District:

Owner Name:

Owner Phone:

Owner Email:

Owner Mailing Address:

Applicant Name (If different from owner):

Applicant Phone:

Applicant Email:

Applicant Mailing Address:

DESCRIPTION OF PROPOSED DEVELOPMENT:

Section B

Civil Engineer Name:

Engineering Firm:

Engineer Phone:

Engineer Email:

Engineer Mailing Address:

Architect Name:

Architectural Firm:

Architect Phone:

Architect Email:

Architect Mailing Address:

Other persons, firms, or corporations having legal or equitable interest in the land (names and contact information):

STATEMENT OF FEE RESPONSIBILITY AND AGREEMENT

I (we) the undersigned certify that the information contained on this application form and the required documents attached hereto are to the best of my (our) knowledge true and accurate.

I (we) further grant access to the site to City of Walker staff and Planning Commissioners.

SIGNATURE OF APPLICANT AND PROPERTY OWNER REQUIRED

The applicant and property owner agree to pay the escrow charges that result from review of this project. Escrow fees shall be deposited at the time of application.

A building permit may be withheld if a project has any outstanding invoices.

I (we) have completed this application and have submitted with this application the appropriate fees and escrow monies and agree to the City of Walker Escrow Policy. I (we) further grant access to the site to City of Walker staff and Planning Commissioners.

_____	_____	_____
*Owners Signature & Date (if different from applicant)	Applicant's Signature	Date

***THE PROPERTY OWNER MUST SIGN THIS APPLICATION**

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Paula Priebe
Planning Director
(616) 791-6879
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Meghann Gorby
Staff Planner / Zoning Administrator
(616) 791-6214
mgorby@walker.city