

CITY OF WALLED LAKE

Special Land Use Review Application

2014



CITY OF WALLED LAKE
APPLICATION FOR SPECIAL LAND USE REVIEW

NOTICE TO APPLICANT: Applications for Special Land Use review by the Planning Commission must be submitted to the City *in substantially complete form*. The application must be accompanied by the data specified in the Zoning Ordinance and Special Land Use Review Checklist (attached), plus the required review fees. Regular meetings of the Planning Commission are held on the second Tuesday of each month at 7:30 p.m. All meetings are held at the Walled Lake City Hall, 1499 E. West Maple Road, Walled Lake, Michigan 48390. Phone number (248) 624-4847.

Special Uses shall comply with the standards in Section 21.29 of the Zoning Ordinance. Accordingly, a public hearing shall be held by the Planning Commission before a decision is made on any Special Use request. Furthermore, a site plan shall be required, which shall be prepared in accordance with Section 21.28 of the Ordinance.

TO BE COMPLETED BY APPLICANT:

I (we) the undersigned, do hereby respectfully request Special Use Review and provide the following information to assist in the review:

Applicant: _____

Mailing Address: _____

Telephone: _____ Fax: _____

Property Owner(s) (if different from Applicant): _____

Mailing Address: _____

Telephone: _____ Fax: _____

Applicant's Legal Interest in Property: _____

Location of Property: Street Address: _____

Nearest Cross Streets: _____

Sidwell Number: _____

Property Description:

If part of a recorded plat, provide lot numbers and subdivision name. If not part of a recorded plat (i.e., "acreage parcel"), provide metes and bounds description. Attach separate sheets if necessary.

Property Size (Square Ft): _____ (Acres): _____

Existing Zoning (please check):

- | | |
|--|--|
| <input type="checkbox"/> R-1A Single Family Residential District | <input type="checkbox"/> C-2 General Commercial District |
| <input type="checkbox"/> R-1B Single Family Residential District | <input type="checkbox"/> C-3 Central Business District |
| <input type="checkbox"/> RD Two Family Residential District | <input type="checkbox"/> O-1 Office District |
| <input type="checkbox"/> RM-1 Multiple Family Residential District | <input type="checkbox"/> CS Community Service District |
| <input type="checkbox"/> RM-2 Multiple Family Residential District | <input type="checkbox"/> I-1 Limited Industrial District |
| <input type="checkbox"/> MH Mobile Home District | <input type="checkbox"/> P-1 Vehicular Parking District |
| <input type="checkbox"/> C-1 Neighborhood Commercial District | |

Present Use of Property: _____

Proposed Use of Property: _____

Please Complete the Following Chart:

Type of Development	Number of Units	Gross Floor Area	Number of Employees on Largest Shift
Detached Single Family			N/A
Attached Residential			N/A
Office			
Commercial			
Industrial			
Other			

ATTACH THE FOLLOWING:

1. The required fee, 8 copies of (11x17), & 5 blue print size of individually folded copies of the site plan, sealed by a registered architect, engineer, landscape architect or community planner.
2. Proof of property ownership and application form.
3. A brief written description of the proposed use.

PLEASE NOTE: The applicant or a designated representative **MUST BE PRESENT** at all scheduled review meetings or the site plan may be tabled due to lack of representation.

APPLICANT'S ENDORSEMENT:

All information contained herein is true and accurate to the best of my knowledge. I acknowledge that the Planning Commission will not review my application unless all information required in this application and the Zoning Ordinance have been submitted. I further acknowledge that the City and its employees shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this application.

Signature of Applicant

Date

Signature of Applicant

Date

Signature of Property Owner Authorizing this Application

Date

TO BE COMPLETED BY CITY

Case No. _____

Date Submitted: _____ Fee Paid: _____

Received By: _____ Date of Public Hearing: _____

PLANNING COMMISSION ACTION

To Approve: _____ To Deny: _____ Date of Action: _____

Reasons for Action Taken: _____

CITY OF WALLED LAKE
SPECIAL USE REVIEW CHECKLIST

Each applicant is required to submit certain materials to the City. This checklist is provided as a benefit to the applicant, who must also review the Zoning Ordinance for applicable standards and regulations. Using this checklist will help the applicant in submitting a complete special use review application. *Failure to submit a complete application can result in delay or denial of the application.*

The site plan shall consist of an overall plan for the entire development, drawn to a scale of not less than 1" = 30' if the site is less than five acres and, 1" = 50' if the site over five acres. To assist in the processing of applications, please check each applicable item provided in your submission. Please submit a brief written description of the existing and proposed uses of the site including but not limited to gross floor area; hours of operation; number of units; number of employees on largest shift; number of company vehicles; etc. Mark each of the boxes with one of the following: **P - Provided, NP - Not Provided, NA - Not Applicable.**

A.	SPECIAL LAND USE STANDARDS - GENERAL	Applicant	Staff	Planning Commission
1.	In location, size and intensity of the principal and/or accessory operations, be compatible with adjacent uses and zoning of land.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	Be consistent with and promote the intent and purpose of this Ordinance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	Be compatible with the natural environment and conserve natural resources and energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Be consistent with existing and future capabilities of municipal services and facilities affected by the proposed use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	Protect the public health, safety, and welfare as well as the social and economic well-being of those who will use the land use or activity, residents, businesses and landowners immediately adjacent, and the City as the whole.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Promote the use of land in a socially and economically desirable manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Not be in conflict with convenient, safe and normal neighborhood vehicular and pedestrian traffic routes, flows, intersections, and general character and intensity of neighborhood development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	Be of such a design and impact that the use, its location and height of buildings, the location nature and height of walls, fences and the nature and extent of landscaping of the site shall not hinder or discourage the appropriate development and use of adjacent land and buildings or impair the value thereof.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9.	In the nature, location, size and site layout and function of the use, be a harmonious part of the district in which it is situated taking into account, among other things, prevailing shopping habits, convenience of access by prospective patrons, the physical and economic relationship of one type of use to another and characteristic groupings of uses of said district.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	In the location, size, intensity of the use and site layout, be such that operations will not be objectionable to nearby dwellings or uses, by reason of noise, fumes, glare, flash of lights, or other similar externalities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. SPECIAL LAND USE STANDARDS - SPECIFIC

Many uses that are permitted subject to special use approval contain specific development standards contained in the zoning ordinance. Please identify each of the specific requirements below.

Applicant Staff Council

1. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

C. NON-APPLICABLE ITEMS

If any of the items are not applicable to a particular site, provide a list of each item considered not applicable, and the reason why each listed item is not considered applicable.

D. OTHER REQUIRED DATA

Other data may be required if deemed necessary by administrative officials or the Planning Commission to determine compliance with the provisions of this Ordinance.