Mail to:
Municipal Service Center
Community Development Office
1100 Wright St.
Marquette, MI 49855

PRINT

CITY OF MARQUETTE
SPECIAL LAND USE PERMIT APPLICATION

CITY STAFF USE

Parcel ID #:_____ File #:_____

Receipt/Inv #:_____ Check #:_____ Received by and date:_____

- **Article 6 Use Requirements Narrative Submitted**: Y / N (not applicable-no requirements)
- **SPR application submitted**: Y / N (not applicable 1-2 family residential) **Number of Site Plans Submitted**:__

Application Deadline (including all support material): _____ Notice Date: _____ Hearing Date: _____

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED, THE SITE PLAN REVIEW REQUEST WILL NOT BE SCHEDULED FOR A HEARING UNTIL IT HAS BEEN VERIFIED THAT ALL OF THE INFORMATION REQUIRED IS PRESENT AT THE TIME OF THE APPLICATION - NO EXCEPTIONS!

FEE SCHEDULE (We can only accept Cash or Check (written to the City of Marquette))

☐ 1 or 2 Family Residential Units; Group Day Care	$995
☐ Commercial and Multi-family Residential (w/ CDRT review)	$3,055
☐ Commercial and Multi-family Residential (w/out CDRT review)	$1,425

If you have any questions, please call 228-0425 or e-mail alanders@marquettemi.gov. Please refer to www.marquettemi.gov to find the following information:

Planning Commission page for filing deadline and meeting schedule
Excerpts from the City Land Development Code

- Section 54.1402 Site Plan Review
- Section 54.1403 Special Land Use Review
- Article 6 Standards Applicable to Specific Land Uses

APPLICANT CONTACT INFORMATION

PROPERTY OWNER

Name:_____

Address:_____

City, State, Zip:_____

Phone #:_____

Email:_____

****APPLICANTS OR REPRESENTATIVES ARE STRONGLY ENCOURAGED TO BE PRESENT AT THE MEETING****

APPLICANT/OWNER'S REPRESENTATIVE

Name:_____

Address:_____

City, State, Zip:_____

Phone #:_____

Email:_____

****APPLICANTS OR REPRESENTATIVES ARE STRONGLY ENCOURAGED TO BE PRESENT AT THE MEETING****

PRE-APPLICATION CONFERENCE

It is strongly encouraged that all applicants and their representatives meet with City of Marquette staff prior to submitting an application for a Special Land Use Permit. A pre-application meeting with staff allows for a preliminary review of the application procedures, project timelines, compliance with the City Master Plan, and other project criteria, and prevents most situations that usually results in a project being postponed.

PROPERTY INFORMATION

Property Address:	Property Identification Number:

Size of property (frontage / depth / sq. ft. or acres):

Zoning District:	Current Land Use:

Surrounding Zoning Districts:	Surrounding Land Use:
North - _____	North - _____
East - _____	East - _____
South - _____	South - _____
West - _____	West - _____

SPECIAL LAND USE REQUESTED

- **Attach a separate sheet to indicate how you meet Article 6 requirements for the proposed use (if applicable).**
- **A site plan review (SPR) application and the required sealed site plan sets must be submitted with the application (See Section 54.1402 Site Plan Review of the LDC) Note: One and two-family residential uses are exempt from SPR.**

Proposed Special Land Use:

Description of physical changes that will be made to the property/structure:

Hours of Operation:

Any other pertinent information:

SIGNATURE

I hereby certify the following:

1. I am the legal owner of the property for which this application is being submitted.
2. I desire to apply for the Special Land Use Permit indicated in this application with the attachments and the information contained herein is true and accurate to the best of my knowledge.
3. The requested Special Land Use Permit would not violate any deed restrictions attached the property involved in the request.
4. I have read Article 6 of the Land Development Code and understand the necessary conditions that must be completed; and I have read Section 54.1402 Special Land Use Review and understand the consideration that will be given in making a decision on this petition.
5. I understand that the payment of the application fee is nonrefundable and is to cover the costs associated with processing this application, and that is does not assure approval of the plan.
6. I acknowledge that this application is not considered filed and complete until all of the required information has been submitted and all required fees have been paid in full. Once my application is deemed complete, I will be assigned a date for a public hearing before the Planning Commission that may not necessarily be the next scheduled meeting due to notification requirements and Planning Commission Bylaws.
7. I acknowledge that this form is not in itself an approval of the Special Land Use Permit but only an application for a Special Land Use permit and is valid only with procurement of applicable approvals.
8. I understand if my Special Land Use Permit is approved that the permit **can be revoked at any time if the required conditions are not being met.**
9. I authorize City Staff and the Planning Commission members to inspect the site.

Property Owner Signature: _____ Date: _____