



CITY OF ALBION—APPLICATION FOR PRELIMINARY PLAT
 City of Albion Planning Department (517) 629-5535
 South Central Michigan Construction Code Inspections (888) 249-7077

Application Instructions: Complete all sections of this form. Type or use black ink. No application will be considered submitted or processed by the Planning Department until a complete application and all required documents are received.

Required Documents:

- Twelve sets of plans, drawn to scale in black line or blueprint.
- Proof of payment for zoning permit application fee.

Fee: \$30 per staff hour, \$150 deposit.

Additional Instructions: The applicant, or a representative with a letter of authority or power of attorney for the applicant, must be present at a meeting of the Albion Planning Commission concerning this application.

<i>FOR OFFICE USE ONLY</i>
Permit #: 20 -
Stamp here for "Date Received"
Received by

<i>Deposit to Account. #101-400-483.00</i>
Stamp here for "Paid"
Amount:

Stamp here for "Approved/Deny"
Date

1. Property Information:

Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>	Parcel Number
Present Zoning District	
Requested Zoning District	

2. Proprietor Information:

Name: <i>Include Contact Person If Applicable</i>	Phone
Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>	City, State Zip Code:

3. Applicant Information:

Name: <i>Include Contact Person If Applicable</i>	Phone
Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>	City, State Zip Code:

4. Surveyor Information: (Include a copy of the preliminary plat with the surveyor's seal.)

Name: <i>Include Contact Person If Applicable</i>		Phone
Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>	City, State Zip Code:	

5. Engineer or Architect Information:

Name: <i>Include Contact Person If Applicable</i>		Phone
Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>	City, State Zip Code:	

6. Developer Information:

Name: <i>Include Contact Person If Applicable</i>		Phone
Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>	City, State Zip Code:	

7. Information Requirements:

The preliminary plat and application shall show the subdivision's entire development scheme and shall include the following:

- A soils investigation of sufficient detail to determine that the soil conditions of the property to be platted are suitable, or can be modified, such that buildings can be constructed on the proposed lots. Areas with soils possessing severe limitations for buildings with the basements shall be noted. Attach a copy of any soil study prepared for the proposed subdivision.
- Verification that the property is properly zoned for the intended use, a determination of the adequacy of adjacent streets, and a determination of the availability and adequacy of sewage disposal, water supply, surface water drainage, gas, telephone and electricity to the proposed subdivision.
- Provision of a map of the proposed subdivision depicting the name thereof, its intended use, its boundary line, section lines within or adjacent to the tract and overall property dimensions as well as property lines of adjacent tracts of land in relation to the boundary line of the proposed subdivision, including areas across abutting roads.
- Location, widths and names of existing prior platted public and private streets and public easements within or adjacent to the proposed subdivision, including those located across abutting roads.
- Location of existing sanitary sewers, water mains, storm drain and other utilities within and adjacent to the proposed subdivision.
- Topography of the tract being proposed for subdivision showing contours with an interval of two feet based on N.G.V.D. datum.

- Location and elevation of the 100-year floodplain on property and an indication of the limits of the floodplain as well as the amount of acreage in the 100-year floodplain.
- The names of abutting subdivisions and names and addresses of owners of all adjacent properties.
- Location of rivers, streams, lakes, drainage courses, high-tension towers, excavations, bridges, culverts and the location or existence of other features which might influence the layout of the proposed subdivision.
- A legal description of the property being proposed for subdivision including the total land area expressed in acres.
- Location and boundaries of regulated and unregulated wetlands.
- Layout of streets, right-of-way widths, and connections with adjoining streets as well as location of alleys, easements and public walkways within the proposed subdivision, include street names.
- The layout and approximate dimensions of lots. Within a box scribed on the preliminary plat map shall be itemized the total number of lots, anticipated square footage of the smallest lot, the anticipated minimum lot frontage and the anticipated minimum frontage at the building setback line for lots with curved frontage.
- Indication of the use of parcels of land intended to be dedicated or set aside for public use or the use of property owners in the proposed subdivision.
- Notes indicating the systems proposed for sewage disposal, water supply and storm drainage.
- The name of the plat.

8. Certification

I hereby certify that I am the owner of record of the named property, or that the proposed zoning reclassification is requested by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, I agree to allow members of the Albion Planning Commission and Planning Department staff to inspect the site as a part of the consideration of this request. I hereby affirm that if this site plan is approved, I will comply with all general and specific special-use conditions required by the Planning Commission under the zoning ordinances. Finally, I shall apply for and receive all applicable permits before beginning any construction.

Signature of Applicant:	Phone	Date
Street Address: <i>Use Complete Street Address, e.g. 101 North Main Street</i>		City, State, Zip Code

9. Evaluation and Determination

PLANNING COMMISSION

<i>Date Application was Received by Commission</i>	<i>Recommendation to City Council (Approved/Deny)</i>
--	---

(7 Days)

(45 Days)

CITY COUNCIL

<i>Date Application was Reviewed by Council</i>	<i>Date of Council's Notification</i>	<i>Approved/Deny</i>
---	---------------------------------------	----------------------

(7 Days)

Reasons for Denial:

Requirements for Final Plat Approval:

PLANNING DEPARTMENT APPROVAL/DENY

<i>Signature</i>	<i>Date</i>
<i>Notes</i>	<i>Stamp</i>