



City of Eastpointe
 23200 Gratiot Avenue
 Eastpointe, MI 48021
 cityofeastpointe.net

APPLICATION PLANNING DEPARTMENT

DATE:	PROJECT ADDRESS/NAME:
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APPLICATION DETAILS

PLANNING COMMISSION / CITY COUNCIL REVIEWS / ZONING BOARD OF APPEALS	<input type="checkbox"/> Site Plan <input type="checkbox"/> Special Land Use <input type="checkbox"/> Planned Unit Development (PUD) <input type="checkbox"/> Text Amendment <input type="checkbox"/> Map Amendment (Re-Zoning)	<input type="checkbox"/> Class A, Non-Conforming Designation <input type="checkbox"/> Variance (non-use, dimensional) <input type="checkbox"/> Text / Map Interpretation <input type="checkbox"/> Administrative Decision Appeal Other: _____
ADMINISTRATIVE REVIEWS	<input type="checkbox"/> Zoning Compliance Letter <input type="checkbox"/> Zoning Verification <input type="checkbox"/> Pre-Development Meeting <input type="checkbox"/> Sketch Plan	<input type="checkbox"/> Screening Device (wall, dumpster, etc.) <input type="checkbox"/> Shared Parking Agreement and Application <input type="checkbox"/> Special Meeting

PROJECT INFORMATION

Usable Floor Area: _____

Current Use *(what business occupied the building previously?)* _____

Proposed Use *(what type of business activity are you engaging in?)* _____

Description of Project: _____

Total Occupancy at One Time: _____ Hours and Days of Operation: _____

Number of Employees: _____ Number of Off-street Parking Spaces Provided: _____

Description of proposed renovations or improvements. Will construction be required? _____

Is there a dumpster enclosure on the property? Yes No

Is there a masonry wall between commercial and residential property? Yes No

Is there screening between parking lots, alleys, and public rights-of-way? Yes No

PARCEL INFORMATION	Impacted Area (Acreage) _____	Current Zoning: _____ Proposed Zoning: _____	Property Tax ID No.(s): 02 - _____ - _____ - _____ - _____ 02 - _____ - _____ - _____ - _____ 02 - _____ - _____ - _____ - _____ 02 - _____ - _____ - _____ - _____
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APPLICANT		TITLEHOLDER OF PROPERTY <i>(if different than Applicant)</i>	
NAME:		NAME:	
COMPANY:		COMPANY:	
CITY, STATE, ZIP:		CITY, STATE, ZIP:	
PHONE:		PHONE:	
EMAIL:		EMAIL:	
SIGNATURE:	DATE:	SIGNATURE:	DATE:

By signing above, it is agreed that: I hereby certify that the information given herein, and that all information and data furnished in connection with this application, is true and correct. I acknowledge that I am solely responsible for any and all errors and omissions. I am authorized and grant permission to the City of Eastpointe to access the subject property for the purposes of preparing staff reports and/or evaluating this application. I understand that all building, electrical, plumbing and fire codes must be met prior to occupancy. I agree to comply with all provisions of the City Code and State Law. ¹

APPLICATION REQUIREMENTS:

- Legal Description of Property** (must be attached on a separate sheet).
- Is the property being held under a Land Contract / Purchase Agreement?** Yes ___ No ___
 If yes, a copy of the Land Contract or Purchase Agreement must be submitted.
- Electronic Copy.** A flash drive or file transfer to planningandzoning@eastpointecity.org of all documents must accompany the application.
- Email Correspondence.** Provide the email for each individual to receive correspondence, other than those designated above:

1. Applications will not be processed unless completely filled out. While applications must be submitted at least 20 business days prior to a requested meeting date, the meeting is not guaranteed. The City of Eastpointe shall retain all fees submitted with an application. Neither the City of Eastpointe, nor any of its employees, agents or representatives shall be responsible for any error or omission in information or data submitted in connection with this application. Applicants are encouraged, prior to the public meeting, to meet with city staff to discuss the project. Reach out to the Planning Department for a conversation.