



Madison Charter Township Conditional Use Permit Application

Application Number: _____

Business/Organization:			
Applicant Name:		Phone Number:	
Address:		City, State, Zip:	
Email:			
Site Address:			
Legal Description:			
Current Zoning:		Current Use:	
Proposed Use:			
Do you own this Property:	_____ Yes	_____ No	_____ Lease
If you lease, please provide a copy of statement of agreement and lease from property owner with this application.			
Attach THREE (3) detailed sketches of site plan			
Applicant Signature:		Date:	
Fee Received: \$ _____			
For Official Use ONLY			
Planning Commission Meeting Date:		Date Adjoining Property Owners Notified:	
Date Plot Plan or Certified Survey Map Received:		Date Notices Posted:	
Approved: _____ Denied: _____			
Reason:			
Official Signature:			Date: