

CITY OF SAGINAW SITE PLAN REVIEW FORM

DESCRIPTION AND TYPE OF DEVELOPMENT: _____

GENERAL LOCATION: _____

NAME OF DEVELOPMENT: _____

ZONING OF SITE: _____

NAME OF SPONSOR OF DEVELOPMENT: _____
ADDRESS: _____

TELEPHONE: _____

NAME OF OWNER OF PROPERTY: _____
ADDRESS: _____

TELEPHONE: _____

NAME OF SITE PLANNER: _____
ADDRESS: _____

TELEPHONE: _____

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF LEGAL OWNER

DATE

REVIEW FEE:

- | | |
|--|-------------------|
| 1. COMMERCIAL OR INDUSTRIAL PROJECT LESS THAN ONE (1) ACRE | \$250 |
| 2. COMMERCIAL OR INDUSTRIAL PROJECT EXCEEDING ONE (1) ACRE | \$400 + \$40/ACRE |
| 3. APARTMENT, TOWNHOUSE, MOBILE HOME PARK, OR OTHER MULTIPLE DEVELOPMENT | \$400 + \$5/UNIT |
| 4. OTHER TYPE OF NON-RESIDENTIAL DEVELOPMENT | \$250 + \$10/ACRE |
| 5. PLANNED DEVELOPMENTS | \$500 + \$5/UNIT |
| 6. FEE FOR REVIEW OF REVISED SITE PLANS | ½ OF ORIGINAL FEE |

AMOUNT PAID: \$ _____

DATE PAID: _____

SIGNATURE, ZONING-PLANNING STAFF: _____