



Keene Township

8505 Potters Road
Saranac, Michigan 48881
(616) 642-9809
Ionia County

Special Use Application

APPLICANT: NAME _____
ADDRESS _____
TELEPHONE HOME _____ EMAIL _____
TELEPHONE WORK _____ EMAIL _____

PROPERTY OWNER NAME _____
ADDRESS _____
TELEPHONE HOME _____ EMAIL _____
TELEPHONE WORK _____ EMAIL _____

PROPERTY LEGAL DESCRIPTION: (use attachments if necessary) _____

PARCEL TAX NUMBER: _____

ZONING DISTRICT _____

ATTACH A SITE PLAN MEETING THE REQUIREMENTS OF ARTICLE 19 AND ANY OTHER USE REQUIREMENTS

DESCRIPTION OF SPECIAL USE: _____

AFFIDAVIT: I certify and affirm that I am the property owner or the owners authorized agent and that I agree to conform to the applicable laws of the jurisdiction. I also certify and affirm that this application form is accurate and complete. I hereby give permission for Township representatives to visit the site.

SIGNATURE _____

DATE _____