

# MACOMB TOWNSHIP

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54111 Broughton Road • Macomb, MI 48042  
586-992-0710 Ext. 7103 • PlanDropBox@macomb-mi.gov

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[www.macomb-mi.gov](http://www.macomb-mi.gov)



**APPLICATION PACKET FOR:**

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## **ADDRESSING FOR SINGLE FAMILY RESIDENTIAL**

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**APPLICANTS TAKE NOTE OF THE FOLLOWING:**

All applications must contain each page from this application packet, including the checklist and any unused pages. If your application does not include all the items, it will not be processed by the Planning Department.

Please use only the forms provided with this application.  
No other forms, however similar, will be accepted.

**If you would like to meet with staff before submitting any application, please call or email us to schedule a meeting. We can be reached at 586-992-0710 Ext. 7103 or [PlanDropBox@macomb-mi.gov](mailto:PlanDropBox@macomb-mi.gov).**

**ADDRESSING APPLICATION**

**SINGLE FAMILY RESIDENTIAL**

This application must be accompanied by all items listed in the checklist below. This application shall be completed and submitted electronically via email to [PlanDropBox@macomb-mi.gov](mailto:PlanDropBox@macomb-mi.gov) and shall include a PDF of the application.

Once the complete package is received, the submittal will be reviewed. If additional information is required, Planning Department staff will contact you via email or phone with additional instructions.

**Please initial below to indicate that each required item is being submitted.**

\_\_\_\_\_ **Completed Application.** Incomplete applications or missing pages will not be accepted.

Initial

\_\_\_\_\_ **Plot Plan** or Survey. An electronic plot plan or survey must be provided.

Initial

\_\_\_\_\_ **Confirming** this is a single-family property that is not part of a larger development such as a subdivision or condominium.

Initial

**Permanent Parcel Number 08** - \_\_\_\_ - \_\_\_\_ - \_\_\_\_.

Location of Property \_\_\_\_\_  
(for example: the north side of 23 Mile Road and ¼ mile east of Romeo Plank Road)

Applicant Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_

Legal Owner of Property \_\_\_\_\_ Phone \_\_\_\_\_  
(Print Owner's Name)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email \_\_\_\_\_

**Legal Owner Signature** \_\_\_\_\_