

MACOMB TOWNSHIP

54111 Broughton Road • Macomb, MI 48042 •

586-992-0710 Ext. 7103

www.macomb-mi.gov



APPLICATION PACKET FOR:

SPECIAL LAND USE

APPLICANTS TAKE NOTE OF THE FOLLOWING:

All applications must contain each and every page from this application packet, including the checklist and any unused pages. If your application does not include all items, it will not be reviewed 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 we are more than happy to accommodate such a meeting. In fact, we encourage it! Please call or email us to schedule a meeting.

SPECIAL LAND USE REVIEW APPLICATION

CHECKLIST OF REQUIRED DOCUMENTS

This application must be accompanied by all items listed in the checklist below. This application shall be completed and submitted with proper payment (as indicated in the application) in an envelope stating "Attention: Planning Department," the project name, and type of project on the outside of the envelope and placed in the night drop off box at the back of the building at Macomb Township Town Hall at 54111 Broughton Road, Macomb Township, MI 48042 (alternatively the package can be dropped off with the Planning Department at Town Hall, or mailed to this address). No plans or supplemental information is required with the submittal of the check, just the application. In addition to this hard copy submittal, **A PDF OF THE APPLICATION, A COPY OF THE CHECK, AND ANY/ALL PLANS AND SUPPLEMENTAL INFORMATION MUST BE EMAILED TO PlanDropbox@macomb-mi.gov**. Once the package is received and we have verified confirmation of payment, the submittal will be reviewed. If additional information is required, Planning Department staff will contact you via email or phone with additional instructions.

- A completed application**, we will not accept incomplete applications or missing pages;
- Letter**, description in detail of the proposed use;
- Payment** – Please make your (non-refundable) check payable to "**Macomb Township Treasurer**". Payment for Special Land Use Review is \$1,625.00, with the exception of Wireless Communication Equipment where the review fee is \$1000.00 per the Michigan Zoning Enabling Act, and **must** be provided per the instructions above. Failure to do so will delay the review process;
- Site Plan(s)** drawn to scale and signed and sealed by a licensed professional and show the specific location of the proposed use;
- Floor Plan(s)** please be as detailed as possible and indicate any large equipment to be used;
- Copy of **proof of interest** in the property (i.e. deed, land contract, lease, purchase option, etc.);
- Crop Management Plat**, if applicable. See attached list of requirements found on page 9 (see Article IV, §10.0403 of the Macomb Township Zoning Ordinance).

ALL APPLICANTS TAKE NOTICE TO THE FOLLOWING:

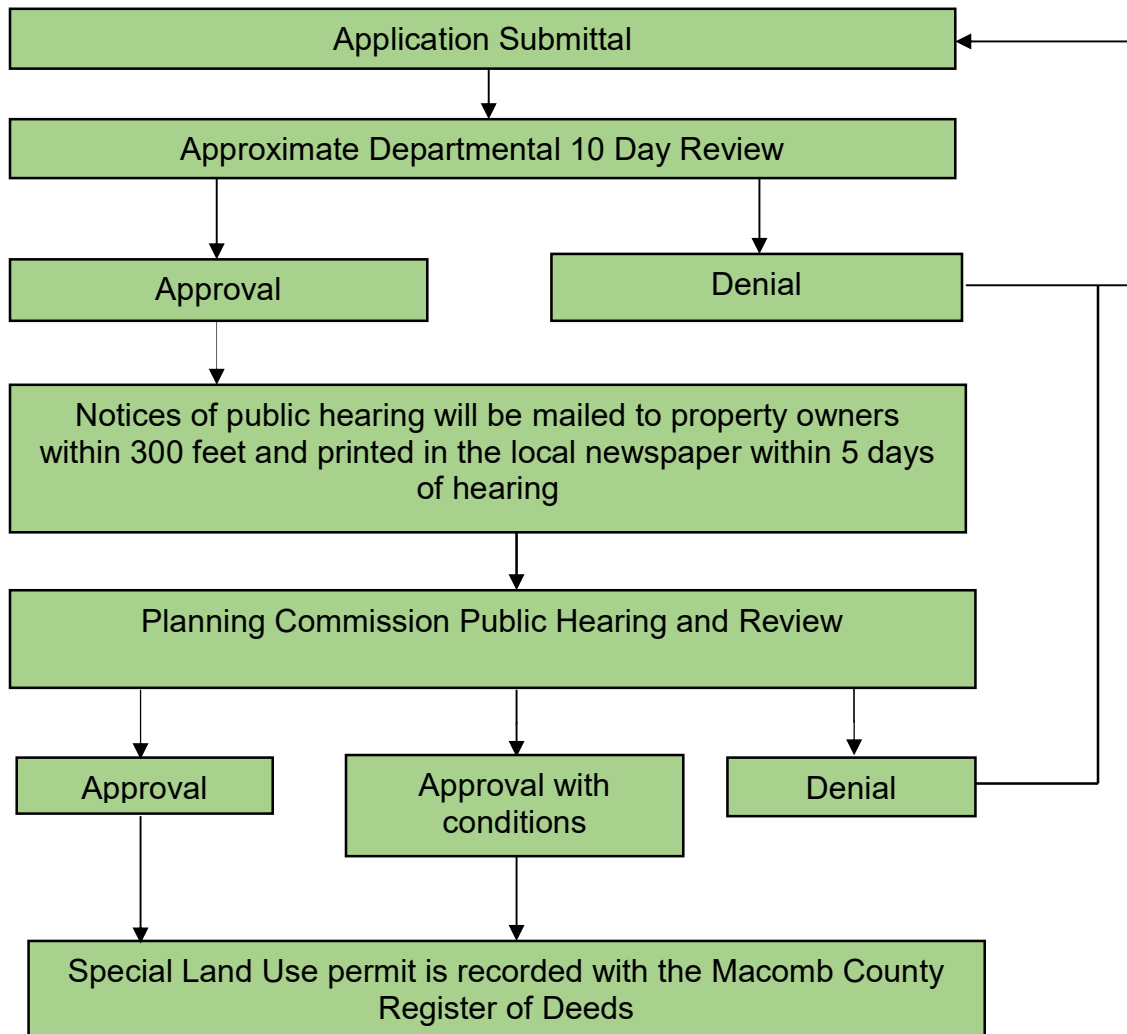
1. **Attendance Required.** The Planning Commission requires the applicant or a representative to be present at the meeting, otherwise the item will be tabled to another meeting date.
2. **Time Charge for Planning Consultant.** . In some instances, the use of outside consultants may be needed, and if deemed necessary, their hourly rate may be added to the review fee.
3. **Multiple or Partial Parcel Applications.** Should the proposed development include more than one or a portion of a parcel, it may be accepted for review by the Planning Department. However, review or building permit shall be issued until all required parcel splits and/or combinations have been executed to the Township Assessor's satisfaction.

SPECIAL LAND USE REVIEW APPLICATION

OVERVIEW

What is a Special Land Use? A Special Land Use application is for a project that is outside the permitted use for property that may potentially impact the adjacent properties.

What are the procedures for a Special Land Use Review? Upon receipt of a complete application for the special land use, the Planning Department will send copies of the application to the appropriate department heads for review and recommendation. These departments will be given approximately ten (10) days for review. Results of the review shall be communicated to the applicant. The Planning Commission will hold a public hearing, at which your presence is **mandatory**, review the request. The Planning Commission has final authority to approve, approve with conditions or deny site plans. After the Planning Commission's approval or approval with conditions, a Notice of Special Land Use shall be recorded with the Macomb County Register of Deeds.



SPECIAL LAND USE REVIEW APPLICATION

APPLICATION

Permanent Parcel Number: 08 - _ _ - _ _ - _ _ .

Project Name _____

Applicant's Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Email Address _____

Applicant's Signature _____

Representative Name _____ Phone _____
(if different from applicant)

Address _____

City _____ State _____ Zip Code _____

Email Address _____

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

Property Frontage (in feet) _____ Feet _____ Depth _____

Present Zoning Classification _____

Existing Land Use _____

Legal Owner of Property _____ Phone _____
(Print Owner's Name)

Address _____ Email _____

City _____ State _____ Zip Code _____

SPECIAL LAND USE REVIEW APPLICATION

VERIFICATION OF RECORDED LEGAL PROPERTY

PROJECT NAME _____

PERMANENT PARCEL NO. 08 - _ _ - _ _ - _ _ - _ _

PUBLIC ROAD(S) FRONTAGE _____

ADDRESS OF PARCEL (if available) _____

OWNERS NAME _____

ADDRESS OF OWNER _____

LEGAL DESCRIPTION

**(Please print or type the description here or attach hereto.
Please indicate if the description is attached)**

CROP MANAGEMENT PLAN REQUIREMENT

If the proposed Special Land Use is for **Composting** exceeding four hundred (400) square feet of crop land per crop acre is require to submit the following additional information (see §10.0403(P) of the Macomb Township Zoning Ordinance).

1. Submittal of Crop Management Plan consisting of:
 - a. Identification of crops that will be grown, acreages and realistic expected yields.
 - b. A map showing or written description of the location of fields in which each crop will be grown and harvested.
 - c. A map showing or written description of the location of fields in which fields will lie fallow.
 - d. Written results of soil fertility test conducted by MSU Soil and Plant Laboratory, or equivalent testing agency.
 - e. Plant nutrient recommendations, consistent with those of the MSU Soil and Plant Laboratory, to determine total compost applications.
 - f. Analysis of compost to determine the nutrient content of the compost.
 - g. Compost nutrient loadings, consistent with MSU Soil and Plant Laboratory nutrient application recommendations.
2. The area of the land expressed in square feet per crop acre for which composting is being requested.
3. Description of material that will be composted.
4. Origin in organic material to be composted.
5. Location of crop land on which compost will be applied.
6. Describe method of composting which will be utilized.
7. Method by which compost will be applied to the crop land.
8. Management plan for the off-site separation of inorganic and toxic matter
9. Describe the type of equipment, which will be utilized in the composting process.
10. Management plan for control of:
 - a. Odor
 - b. Drainage
 - c. Dust
 - d. Noise
 - e. Rodents, flies and other living nuisances
11. Identification of the haul route(s); days and hours of delivery; time of year deliveries will be made; and frequency that material will be delivered.
12. Number of employees who are involved in the handling of the organic matter and processing of compost.
13. Description of each piece of machinery that will be utilized in the handling of the organic matter and processing of compost.