

MACOMB TOWNSHIP

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

www.macomb-mi.gov



APPLICATION PACKET FOR:

MASTER DEED AMENDMENT REVIEW

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.

MASTER DEED AMENDMENT REVIEW APPLICATION PACKET

CHECKLIST OF REQUIRED DOCUMENTS

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 and shall include a PDF of the application, a copy of the check, and any/all plans and supplemental information. The check shall be hand delivered to the Planning Department within Town Hall during posted business hours or mailed to Macomb Township Town Hall at 54111 Broughton Road, Macomb Township, MI 48042 in an envelope stating "Attention: Planning Department," (if mailed, the application shall be included in the envelope with the check).

Once the complete 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.

Please initial below to indicate that you have submitted each required item. Failure to initial that all items have been provided will result in an immediate rejection of the application.

_____ **Completed Application.** Incomplete applications or missing pages will not be accepted.
Initial

_____ **Payment.** Please make your (non-refundable) check payable to "Macomb Township". Payment for Master Deed Amendment Review is \$600.00. All application fees include an initial review and up to two additional review cycles. Payment must be dropped off at the Planning Department, or mailed with tracking, addressed to the Planning Department.
Initial

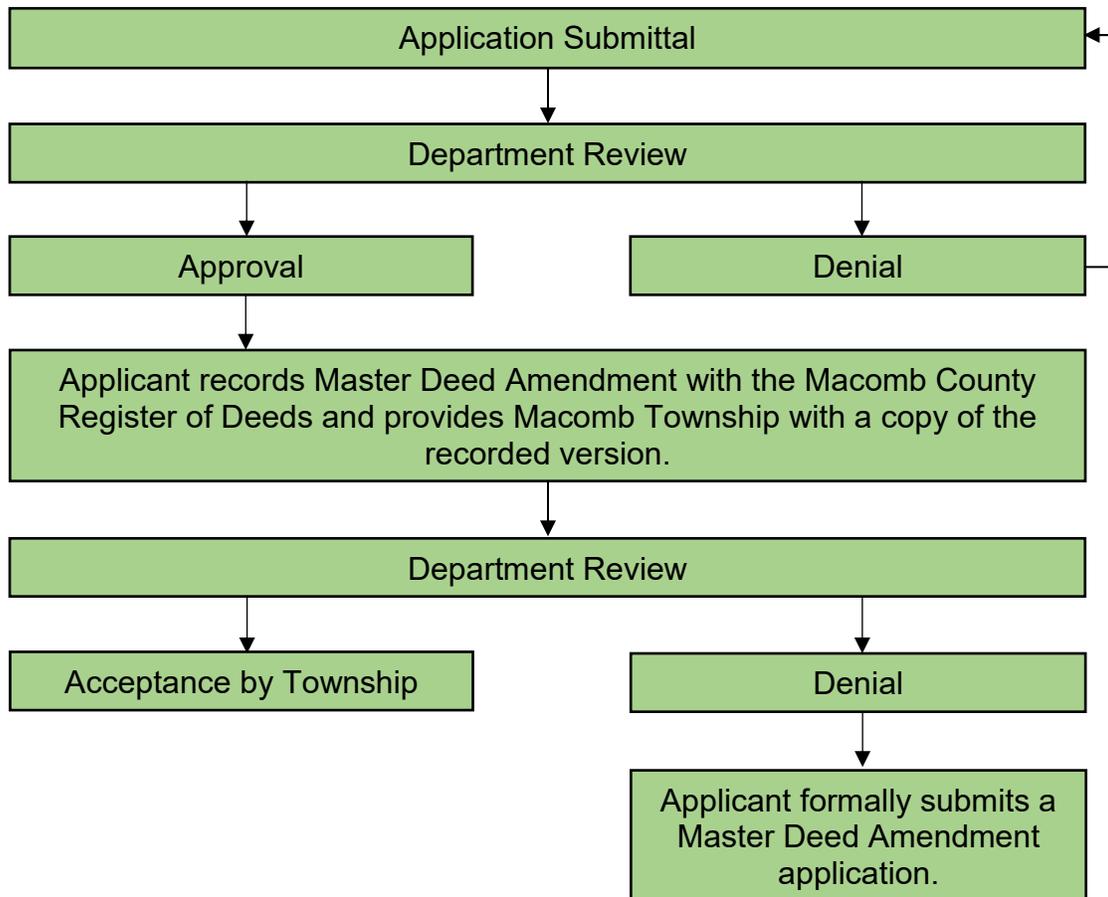
_____ **Letter.** A letter describing in detail the purpose of the requested amendment.
Initial

_____ **Proposed Amendment including amended Exhibit "B" document, if applicable.** Amendments shall be provided in Microsoft Word format. The Exhibit "B" document shall be provided in PDF format (11x17 or 24x36). A complete document set must be provided for review. Incomplete documents will not be accepted.
Initial

MASTER DEED AMENDMENT REVIEW APPLICATION PACKET

OVERVIEW

What are the procedures for an Amendment to a Master Deed? Upon receipt of a complete application for a Master Deed Amendment request, the Planning Department will distribute the application and submittals to internal departments for an approximate twenty (20) day review period. Results of the reviews shall be communicated to the applicant.



MASTER DEED AMENDMENT REVIEW APPLICATION PACKET

APPLICATION

**MACOMB TOWNSHIP PLANNING DEPARTMENT
54111 BROUGHTON ROAD
MACOMB, MICHIGAN 48042
(586) 992-0710 EXT. 7103**

Permanent Parcel Number 08 - ____ - ____ - ____.

Project Name _____

Applicant Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Applicant Signature _____ **Date** _____

Representative Name _____ Phone _____
(if different from applicant)

Address _____

City _____ State _____ Zip Code _____

Email _____

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

Representative Signature _____ **Date** _____