

MACOMB TOWNSHIP

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

www.macomb-mi.gov



APPLICATION PACKET FOR: **REQUEST TO ALTER GRADE**

APPLICANTS TAKE NOTE OF THE FOLLOWING:

All applications must contain every 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 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 arrange such a meeting. In fact, we encourage it! Please call (586)992-0710 ext. 7103 or email us PlanDropBox@macomb-mi.gov to schedule a meeting.

REQUEST TO ALTER GRADE 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 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.

Please initial and check boxes below to indicate that each required item is being submitted. Failure to do so will result in an immediate rejection of the application.

_____ **Completed Application.** This includes an **Affidavit of Ownership**. Incomplete applications or
Initial missing pages will not be accepted.

_____ **Payment.** Please make your (non-refundable) check payable to “**Macomb Township**”. Payment
Initial for Site Plan Review is \$2,000.00 including the public hearing fee. All application fees include an initial review and up to two (2) additional review cycles. Must be dropped off at the Planning Department, or mailed (with tracking) addressed to the Planning Department.

_____ **Letter.** A letter detailing the description of the project.
Initial

_____ **Macomb County Soil Erosion Permit.**
Initial

_____ **Macomb County Road Commission Approach Permit.**
Initial

_____ **Site Plan.** All site plans must include the following minimum information:
Initial

- Seal of a registered (MI) Land surveyor or Engineer along with their original signature.
- Existing and proposed grades of the lot and building corners (labeled B.L. for exterior brick ledge) including the lowest floor, first floor and any walkout elevations
- Elevation and location of the 100-year flood plan (if applicable)
- Finished grade of existing buildings on adjacent property (include distance to each building)
- The Benchmark which was used and one Benchmark on site (USGS Datum)
- Ditch or swale line elevations
- Sump pump discharge pipe being constructed directly to an approved drainage system
- Road centerline and edge elevations
- Off-site elevations (50' beyond site limits)
- Sidewalk elevations (if applicable)
- Site boundary dimensions and proposed setbacks and side yard dimensions
- Legal description of the property
- Road right-of-way width(s) as well as type and width of road surfaces(s)
- Proposed drainage pattern with arrows
- All existing and proposed utilities and easements
- A location map, north arrow, and scale (between 1"=10' and 1'=40')
- A 2% slope away from the building or house in the first 25' then a 1% slope thereafter (see Macomb Township Standard Lot Grading template)
- Elevations for all existing manholes, catch basins, culverts, hydrants, and gate valves
- Side lot cross sections where new home is adjacent to an existing home
- The septic field elevation from Macomb County Health Department Permit (include the “MCHD” Benchmark location and elevation on plan)

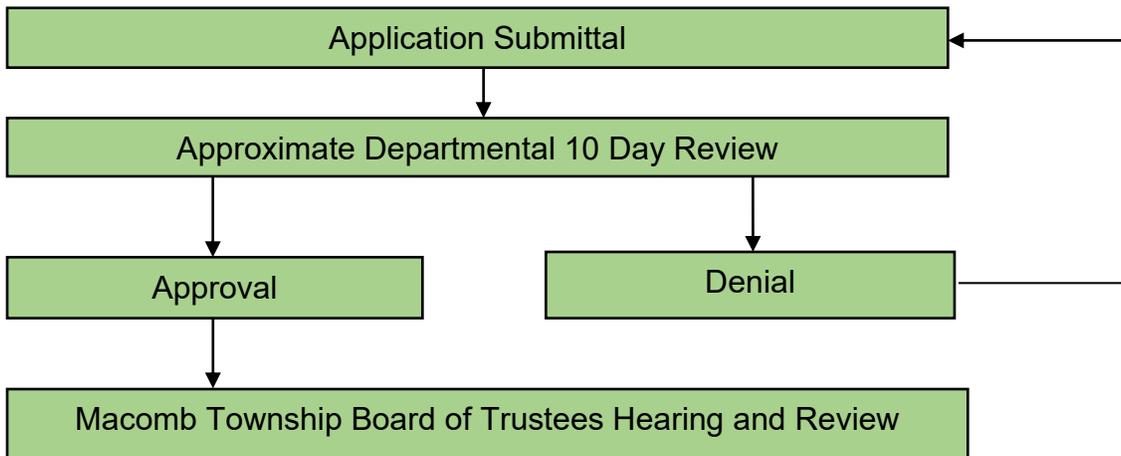
REQUEST TO ALTER GRADE REVIEW APPLICATION

OVERVIEW

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.

What is a Request to Alter Grade? A request to alter grade is changing or reshaping the slope of a piece of property.

What are the procedures for a Request to Alter Grade? Upon receipt of a complete application for the request to alter grade, 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 Macomb Township will hold a public hearing, at which your presence is **mandatory**, to review the request. The Macomb Township Board of Trustees will decide regarding this project.



ALL APPLICANTS TAKE NOTICE TO THE FOLLOWING:

- 1. Attendance Required.** The Macomb Township Board of Trustees require the applicant or the applicant's representative to be present at the meeting, otherwise the item may be tabled to another meeting and fee may be incurred.

REQUEST TO ALTER GRADE REVIEW APPLICATION

APPLICATION

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

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

Project Name _____

Applicant's Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Email _____

Applicant Signature _____

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's Name: _____ Phone _____

(if different from applicant)

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 _____

Legal Owner's Signature _____

REQUEST TO ALTER GRADE REVIEW APPLICATION

VERIFICATION OF RECORDED LEGAL PROPERTY

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

PROJECT NAME _____

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)

REQUEST TO ALTER GRADE REVIEW APPLICATION

AFFIDAVIT OF OWNERSHIP

PLEASE TAKE NOTICE that an Affidavit of Ownership must be filed with all development and variance applications in Macomb Township. Proof of ownership or interest in the property must be attached; (i.e. affidavit, deed, land contract, option agreement, lease, etc.) This requirement must be fulfilled to promptly process your application.

(I), (We) _____, the undersigned fee title owner(s) of property _____ hereinafter referenced, acknowledge (my) (our) agreement to permit / allow the property described within the attached application for _____ to receive consideration by Macomb Township.

(I), (We) further authorize _____, as a(n) _____ of the property, to process an Application with the Township of Macomb on (my) (our) behalf.

Please have the property owner(s) sign below:

(Owner Signature)

(Print Name)

THIS FORM RELATES TO PROPERTY WITH THE FOLLOWING PARCEL NUMBER(s):

08 - ____ - ____ - ____.

STATE OF MICHIGAN

ss.

COUNTY OF MACOMB

On this _____ day of _____, 20____, before me personally appeared _____ to me known to be the person(s) described in and who executed the foregoing instrument and acknowledged that _____ executed the same as _____ free act and deed.

Notary Public

_____, Michigan

My Commission Expires: _____

Acting in _____ County, Michigan