

## Special Land Use Requirements

WEST TRAVERSE TOWNSHIP PLANNING COMMISSION  
8001 M-119 PO Box 528 Harbor Springs, MI 49740 Ph: 231-526-7361  
[zoning@westtraversetownship.com](mailto:zoning@westtraversetownship.com)

### DIRECTIONS TO APPLICANT

The following items are needed to comply with the **SPECIAL LAND USE REQUIREMENTS** (Article 6) of the West Traverse Township Zoning Ordinance.

**WHEN REQUIRED:** Special Land Use review is required for all uses which are designed as a Special Land Use in Article 3 of the West Traverse Township Zoning Ordinance.

**ITEMS TO SUBMIT:** All items should be submitted to the West Traverse Township Zoning Administrator at least **30 days prior** to the desired public hearing date. The regular meeting date is the second Wednesday of each month.

1. **Application for Special Land Use Review.**
2. **Site Plans or Plot Plans** - 9 full-sized in addition 1 reduced size (maximum 11"x17") copy and 1 digital copy of all maps or graphics
3. **Site Plan Review Check List or Plot Plan Checklist** in accordance with Article 5 of the West Traverse Township Zoning Ordinance. Applicable agency reviews as required.
4. **Impact Statement** for Site Plan Review.

#### **WHEN TO SUBMIT A PLOT PLAN OR SITE PLAN:**

1. **Site Plans** are required for all Special Uses except those listed in #2 below.
2. **Plot Plans** are required for Major Accessory Buildings without a Principal Building and for Special Land Uses that are accessory to a single-family or two-family dwelling (such as Bed and Breakfasts, Group Child Care Homes, Home Based Businesses, On-Site Wind Energy and Freestanding Solar Energy Panels).

### IN ADDITION:

The applicant should distribute 1 copy of the completed plan to each of the following agencies (if required):

AGENCY	ADDRESS	PHONE
Health Department of Northwest Michigan	3434 Harbor Petoskey Rd Suite A Harbor Springs, MI 49740	231-347-6014
Emmet County Road Commission (for county roads)	2265 E. Hathaway Harbor Springs, MI 49740	231-347-8142
Michigan Department of Transportation (for state highways)	Gaylord Transportation Service Center 1088 M-32 East Gaylord, MI 49735	989-733-3832 or 888-304-MDOT (6368)
Harbor Springs Area Fire Department	160 Zoll St Harbor Springs, MI 49740	(231) 526-2104
Soil Erosion Officer (If the building is within 500' of surface water or an acre or more of land is disturbed, including roads.)	3434 Harbor-Petoskey Rd Suite E Harbor Springs, MI 49740	231-439-8996

# Application for Special Land Use Review

RETURN TO: WEST TRAVERSE TOWNSHIP  
8001 M-119 PO Box 528 Harbor Springs, MI 49740  
PHONE: (231) 526-7361 FAX: (231) 526-0028 EMAIL: [zoning@westtraversetownship.com](mailto:zoning@westtraversetownship.com)

DATE RECEIVED \_\_\_\_\_

CASE # \_\_\_\_\_

\$ \_\_\_\_\_  
FEE

DATE PAID \_\_\_\_\_

PLEASE MAKE CHECKS PAYABLE TO WEST TRAVERSE TOWNSHIP

Applicant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Applicant's Address \_\_\_\_\_

Applicant's Email Address \_\_\_\_\_ @ \_\_\_\_\_

Owner's Name \_\_\_\_\_

Owner's Address \_\_\_\_\_

Owner's Email Address \_\_\_\_\_ @ \_\_\_\_\_

## JOB SITE LOCATION

Address: \_\_\_\_\_ Tax Parcel #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Zoning District: \_\_\_\_\_

## DESCRIBE SPECIAL LAND USE REQUEST

## REQUIRED USE INFORMATION

Current use of the property: \_\_\_\_\_

Proposed use of the property: \_\_\_\_\_

## PLEASE ATTACH

- ☐ Site Plan\* or Plot Plan\*— 9 copies in addition to 1 reduced sized copy and 1 digital copy
- ☐ Site Plan Review or Plot Plan Review Checklist
- ☐ Impact Statement
- ☐ Legal Description of Property
- ☐ Copies of all other required permits obtained

\*Site plan or plot plan shall show all information listed in the Site Plan Review Checklist (Section 504 of the Zoning Ordinance) or Plot Plan Review Checklist (Section 502:2 of the Zoning Ordinance) unless specifically waived by the Planning Commission. All required information is due at least 30 days prior to the public hearing date.

## INSPECTIONS:

As owner and/or applicant representing the owner, I do ☐ do not ☐ authorize West Traverse Township (staff, appointed board, trustees or committee members) to enter upon the subject property for purposes of making inspections related to the project or request identified in this application. If authorized, such inspections or site walks shall be conducted at reasonable hours and times.

**I certify that all of the above information is accurate to my fullest knowledge:**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Required) Signature of Property Owner

\_\_\_\_\_  
Printed Name of Property Owner

\_\_\_\_\_  
Date

## PLOT PLAN & SITE PLAN CHECKLISTS FOR SPECIAL LAND USES

### PLOT PLAN REVIEW CHECKLIST

For Special Land Uses that Require the Submission of a Plot Plan

Case # \_\_\_\_\_

Date Received \_\_\_\_\_

Subject Property Address \_\_\_\_\_

Subdivision and Lot Number (If Applicable) \_\_\_\_\_

Proposed Use of Property \_\_\_\_\_

Proposed Number of Employees \_\_\_\_\_

### Plot Plan Requirements

		Yes	No	N/A	Comments
1	The actual shape, location and dimension of the lot. If the lot is not a lot of record, sufficient survey data to locate the lot on the ground.				
2	The shape, size and location of all buildings or other structures to be erected, altered or moved and of any other buildings or other structures already on the lot.				
3	The existing and intended use of the lot and of all structures upon it.				
4	Location of required setbacks of the zoning district.				
5	The location and configuration of the lot access and driveway drawn to scale.				
6	The location and width of all abutting right-of-ways, easements and public open spaces within or bordering the subject project.				
7	Natural features such as forests, bodies of water, wetlands, high risk erosion areas, slopes over 10%, drainage and other similar features, if determined by the Zoning Administrator to be applicable.				
8	North arrow.				
9	Such other information concerning the lot, adjoining lots or other matters as may be essential for determining whether the provisions of this Ordinance are being observed.				

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## SITE PLAN REVIEW CHECKLIST

For Special Land Uses that Require the Submission of a Site Plan

Case # \_\_\_\_\_

Date Received \_\_\_\_\_

Subject Property Address \_\_\_\_\_

Subdivision and Lot Number (If Applicable) \_\_\_\_\_

Proposed Use of Property \_\_\_\_\_

Proposed Number of Employees \_\_\_\_\_

### Site Plan Requirements

	Basic Map Information	Yes	No	N/A	Comments
1	Number of Copies: 9 copies in addition to 1 reduced size copy (maximum 11" X 17") and 1 digital copy.				
2	Seal of the registered architect, landscape architect, land surveyor or professional engineer who prepared it. <i>(The Zoning Administrator shall have the authority to waive the requirements of a professionally prepared plan where it determines a sketch plan would be adequate.)</i>				
3	Legal description of the site.				
4	Zoning district of the site and adjacent properties.				
5	Scale of 1" equals 50' for less than 5 acres and at 1" equals 100' for 5 acres or more, and shall contain a general location map at a scale of 4" equals 1 mile giving site location.				
6	Map Info: Date, north point, scale, property dimensions, street names, size in square feet or acres and any other necessary identification information.				
	Structures, Storage & Easements	Yes	No	N/A	Comments
7	All existing and all proposed structures including fences, walls and other structures within 100' of the subject property including required setback lines.				
8	Floor area and floor plans of all structures.				
9	Building elevations (front, side and rear views) and height of all structures.				
10	Location of all outdoor lights, pole heights, bollards, building attached and luminary shielding techniques.				
11	Location and sizes of signs (must comply with Section 413).				
12	Outdoor storage areas, snow storage areas and waste receptacles.				
13	Percentage of lot coverage.				

14	All existing utility lines and other services within and bordering the subject property.				
15	Proposed method of screening.				
16	Where large equipment or machinery is to be installed as part of the development, the location, type, horsepower, fuel, dimension and other data of all such equipment or machinery shall be indicated.				
	<b>Parking, Circulation &amp; Roads</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
17	Ingress/egress drives and right-of-ways/easements.				
18	Parking areas with spaces delineated. Parking spaces required_____, parking spaces actual_____, and accessible (ADA) parking location and number _____.				
19	Roads.				
20	Pedestrian circulation features.				
21	Loading and unloading areas.				
22	Parking lot landscaping.				
	<b>Natural Features &amp; Landscaping</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
23	Natural features such as bodies of water, wetlands and slopes.				
24	Topography information based on USGS datum or selected on site elevations. More detailed information may be required where the Planning Commission determines that the site and use warrant a more critical review of topography.				
25	Proposed landscaping. Indications of trees and shrubs shall only be used on the site plan where trees and shrubs exist or where such vegetation will be planted prior to occupancy. All such trees and shrubs shall be labeled as to whether existing or proposed. Whenever a tree or group of trees of 3" caliper or greater is to be removed as part of the planned improvements, it or their location must be shown on the site plan in dotted outlines and noted "to be removed".				
26	Are there scenic view considerations?				
	<b>Drainage &amp; Soil Erosion</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>
27	Generalized soil analysis data, which may include data prepared by the Emmet County Soil Conservation District regarding the soils and their adaptability to the use. More detailed information may be required where the Planning Commission determines that the site and use warrant a more critical review of soils.				
28	Soil erosion and sediment control measures which shall include preventative soil erosion devices or measures, both during and after any site work related to the development when required.				

29	Drainage and stormwater management plan.				
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	Other Requirements	Yes	No	N/A	Comments
30	Impact Statement attached?				
31	Harbor Springs Area Fire Department approval?				
32	Fire hydrants and fire vehicle access.				
33	Emmet County Road Commission or MDOT approval?				
34	Health Department of Northwest Michigan approval?				
35	Army Corps of Engineers approval?				
36	Soil erosion approval?				
37	Michigan Department of Environmental, Great Lakes & Energy (EGLE) approval?				
38	Wetlands permit approval?				

**ADDITIONAL COMMENTS:**

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**

## Impact Statement for Special Land Uses that Require Site Plan Review

Case # \_\_\_\_\_

Date Received \_\_\_\_\_

Applicant's Name \_\_\_\_\_

Project Title \_\_\_\_\_

Property Tax ID \_\_\_\_\_

### 1. PROJECT DESCRIPTION

Give a description of the proposed development including site land use characteristics, the number of lots or units and the number and characteristics of the population impact such as density, elderly persons, school children, tourists, family size and income as applicable:

## **2. EXPECTED DEMANDS ON COMMUNITY SERVICES**

Explain what the impact will be on the following community services and describe how services will be provided (if applicable):

**a. Sanitary Services (volume of sewage)**

**b. Domestic Water (volume of water consumption related to ground water reserves or community system capacity)**

**c. Traffic Volumes (change in traffic volume)**

**d. Schools**

**e. Fire Protection**



### **3. ENVIRONMENTAL IMPACTS**

Include statements relative to the impact of the proposed development on (if applicable):

**a. Soil Erosion**

**b. Shoreline Protection**

**c. Wildlife Habitat**

**d. Air Pollution**

**e. Water Pollution (ground and surface)**

**f. Noise**

\_\_\_\_\_  
**Applicants Signature**

\_\_\_\_\_  
**Date**