Application for Zoning Ordinance Text Amendment

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

DATE RECEIVED	FOR OFFICE USE ONLY	CASE #
\$ FEE		DATE PAID
	ASE MAKE CHECKS PAYABLE TO WEST TRAVERSE TOW	
Applicant's Name	Phone	>
Applicant's Address		
Applicant's Email Address		@
This request is to change th	ne text of section (§)	
Show the proposed change below using <u>underlining</u> to show new text, and strike out, like this , to		
show the proposed change below using <u>underlining</u> to show new text, and strike out, like this , to show words to be deleted.		
What is the purpose of the proposed zoning text change?		
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Application for a zoning ordi	inance text amendment must be submitted at least 30 days g, the Planning Commission will make a recommendation nt to the Emmet County Planning Commission for commen	on the amendment and will
Application for a zoning ordi date. After the public hearin send the proposed amendmen	inance text amendment must be submitted at least 30 days g, the Planning Commission will make a recommendation nt to the Emmet County Planning Commission for commen	on the amendment and will
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