

VILLAGE OF PINCKNEY  
APPLICATION FOR SPECIAL USE PERMIT

Case \_\_\_\_\_ Fee \$ 700  
Applicant SMITH Builders LLC Phone 734-878-1650  
Address 4670 M-36 Pinckney MI 48169

The above named applicant(s) hereby request of the Planning Commission, in accordance with the Village of Pinckney Zoning Ordinance, Section 152.240 – 152.243, a special use permit for the property located at:

Address MAIN ST Plat \_\_\_\_\_

Lot \_\_\_\_\_ SEE ATTACHED Tax Code Number \_\_\_\_\_

**Attach Legal Description**

A previous request \_\_\_\_\_ has or \_\_\_\_\_ has not been made with respect to this property.

Date of previous request \_\_\_\_\_ Decision of previous request \_\_\_\_\_

The request is for (please be specific)  
SPECIAL USE FOR Multiple - FAMILY  
Dwellings IN Resident OFFICE BUSINESS DISTRICT

With regard to the above request, I (We) apply for the following specific decision: (Please refer to Section 152.240 – 152.243 of the Village of Pinckney's Zoning Ordinance):

14-22-403-033      14-22-403-031      14-22-400-019  
152.241 (B)(2) Request approval OF Special use request FOR  
Multi-Family Dwelling IN ROB District

I (We) authorize Village of Pinckney to act as my (our) authorized agent in the hearing on my (our) request (Please attach any supplementary information on your appeal.)

Signature: \_\_\_\_\_

\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Date received: \_\_\_\_\_ Property Zoning: ROB

Date of Public Hearing: \_\_\_\_\_ Date of Publication of Notice: \_\_\_\_\_  
Decision of Planning Commission: \_\_\_\_\_

PLANNING COMMISSION  
Date of Council Meeting: \_\_\_\_\_  
Decision of Village Council: (Attach a copy of Council Meeting Minutes)  
Special Use Permit: Granted: \_\_\_\_\_ Not Granted: \_\_\_\_\_

Attach further information as necessary.

Signature of Zoning Administrator: \_\_\_\_\_ Date \_\_\_\_\_

This permit is not transferable.