



VILLAGE OF  
**PINCKNEY**

220 S. Howell Street  
Pinckney, MI 48169  
zoning@villageofpinckney.org

**REQUEST FOR  
PRE-PLANNING MEETING**

Date of Request \_\_\_\_\_

Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Project Address: \_\_\_\_\_ Tax Code: \_\_\_\_\_

Lot: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Zoning: \_\_\_\_\_

Description of Project: \_\_\_\_\_

**I would like to request a pre-planning meeting to discuss the above referenced project within the Village of Pinckney & request to meet with the following Village Representatives**

- Zoning Administrator
- Department of Public Works
- Planning Consultant
- Village Engineers
- Village Attorney

I agree to pay all fees associated with this meeting.

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_

Please indicate potential days and times for scheduling purposes: \_\_\_\_\_

Date of Submittal: \_\_\_\_\_

Escrow Paid: \_\_\_\_\_

Fees:	
Pre-Planning Meeting	\$1,000 per meeting (Escrow) Additional funds may be required. Unused funds will be refunded to the applicant