

SITE PLAN REVIEW APPLICATION

This application is required for site plan review by the Allegan County Drain Commissioner. Incomplete applications may be returned. Allow up to 30 days for review.

| SITE INFORMATION | | | |
|---|--------------------|---|------------------|
| Project Name: | | | |
| Project Address: | | | Municipality: |
| Parcel Number: | | Section: | Quarter Section: |
| No. of Acres: | No. of Lots/Units: | Drainage District: Distance to County Drain: | |
| Development Type: | | | |
| <input type="checkbox"/> Plat or Subdivision <input type="checkbox"/> Site Condominium <input type="checkbox"/> Condominium <input type="checkbox"/> Apartment/Townhouse <input type="checkbox"/> Mobile Home Park <input type="checkbox"/> Institutional <input type="checkbox"/> Commercial <input type="checkbox"/> Business Park <input type="checkbox"/> Industrial Park <input type="checkbox"/> Industrial <input type="checkbox"/> Mixed Use (PUD, PRD) <input type="checkbox"/> Other: _____ | | | |
| Project Type: <input type="checkbox"/> Private <input type="checkbox"/> County Drain (Section 433 Agreement) | | Review Type: <input type="checkbox"/> Preliminary Plat <input type="checkbox"/> Construction Drawing | |

| CONTACT INFORMATION | | |
|--------------------------------|--------|--------|
| Developer or Owner: | | |
| Mailing Address: | | |
| Contact Name: | Phone: | Email: |
| Design Engineer: | | |
| Mailing Address: | | |
| Contact Name: | Phone: | Email: |
| Contractor (if known): | | |
| Mailing Address: | | |
| Contact Name: | Phone: | Email: |
| Signature of Applicant: | | Date: |

| FEES |
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| FEES MUST BE SUBMITTED WITH COMPLETED APPLICATION PRIOR TO PROCESSING. <i>Contact Drain Commissioner for required fees.</i> |