



ANTWERP TOWNSHIP COMMERCIAL CHANGE OF USE REVIEW

Change of use with no building expansion

Applicant Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____ E-mail: _____

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate.

Applicant Signature: _____ Date: _____

Applicant is the: Owner Lessee Contract Purchaser Contractor/Architect/Other

Property Owner's Name (if different from applicant): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s): _____ E-mail: _____

Owner Signature: _____ Date: _____

Project Address: _____

Parcel Number: _____

Explanation of Proposed Use (attach additional sheets if necessary): _____

TO BE COMPLETED BY TOWNSHIP

Date application and fee received and accepted: _____ Staff Initials: _____

Fee Amount \$ 125.00 Received? Yes No

Zoning Administrator Review

Comments:

Decision:

Note: Information contained in this application, as well as supporting documentation, may be subject to review by the public if a Freedom of Information Act Request is filed.

FOR MORE INFORMATION

See the Township web site, www.antwerptownship.com, contact the Township Hall at (269) 668-2615. For zoning information, please contact Zoning Administrator David Jirousek at david@horizon-planning.com or 616-540-1794.