



SPECIAL USE PERMIT APPLICATION – THOMAS TOWNSHIP PLANNING COMMISSION

Special Use Permit Fee is \$350.00 – Special Meeting is \$500.00

Name: _____

Address: _____

Phone Number (Home): _____ (Work): _____ (Cell): _____

Email Address: _____

Signature: _____ Date: _____

Provide the legal description of the property affected

Tax Identification Number: _____

Current Zoning: _____

What is being requested: _____

Current owner of property if different than applicant

Name: _____

Address: _____

Phone Number (Home): _____ (Work): _____ (Cell): _____

Email Address: _____

Signature: _____ Date: _____

This application must be filled out completely and returned to the Community Development Department no less than 30 days prior to a scheduled Planning Commission Hearing.

Office Use Only:

G.L. 101-000-000-494-000

Date Filed: _____ Amount Paid: \$_____ Hearing Date: _____

249 NORTH MILLER ROAD, SAGINAW, MICHIGAN 48609 (989) 781-0150