

DAY CARE SPECIAL CONDITIONAL USE - SPECIAL LAND USE APPLICATION
CHARTER TOWNSHIP OF YPSILANTI
7200 S. HURON RIVER DRIVE
YPSILANTI, MI 48197
(734) 485-3943

SECTION 2119 – YPSILANTI TOWNSHIP ZONING ORDINANCE #74

1. Applicant's Name: _____
2. Address: _____
3. Phone Number: _____ FAX Number _____
4. Name/s and address/s of all record owner/s and proof of ownership.
Attached
5. If applicant is not the fee-simple owner, the owner's signed authorization for application must be attached to this application. Attached
6. Address of Property Involved for this submittal - _____
Lot #/s _____, Subdivision Name _____
Property Number: K-11-_____.
7. Current Zoning of Property _____
8. Scaled and accurate survey drawing, correlated with a legal description and showing all existing buildings, drives and other improvements. Attached
9. Section of Zoning Ordinance involved in this request 2122.(1)
10. Copy of State license must be attached to this application. Attached
11. Describe Proposed Use GROUP DAY CARE

_____ Date _____
Applicant's Signature

_____ Date _____
Planning & Development Coordinator's Signature

Fee \$ **100.00** (account # 101.000.000.607.001)

Application cannot be appealed to the Board of Appeals. If denied by the Planning Commission, re-application can be made to the Planning Commission after 365 days, after the date of this application, except on the grounds of new evidence or proof of changed conditions found by the Planning Commission to be valid.