

# Zoning Administrator Meeting Application



Charter Township of  
*Augusta*  
Michigan

8021 Talladay Road, P.O. Box 100  
Whittaker, MI 48190-0100

Office: (734) 461-6117 Web: [www.augustatownship.org](http://www.augustatownship.org)

STAMP RECEIVED

STAMP PAID

## TOWNSHIP FILE

ZM - \_\_\_\_ - \_\_\_\_

## RELATED FILES

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

\_\_\_\_ - \_\_\_\_ - \_\_\_\_

## PAYMENT INFORMATION

**FEE:** \$85.00 for 30 minutes

Total Amount Paid: \$ \_\_\_\_\_

Paid via  Cash  Check # \_\_\_\_\_

Rec'd By \_\_\_\_\_ Receipt # \_\_\_\_\_

G/L # \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

## GENERAL INFORMATION

Name(s) of Legal Property Owner(s) \_\_\_\_\_

Street Address (Street # & Name or P.O. Box) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_

Name of Petitioner (if Different from Owner) \_\_\_\_\_

Company \_\_\_\_\_ Interest in Property \_\_\_\_\_

Street Address (Street # & Name or P.O. Box) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

## PROPERTY INFORMATION

Address of Property: \_\_\_\_\_

Tax I.D. Number(s): \_\_\_\_\_

Reason for Meeting: \_\_\_\_\_

## ZONING ADMINISTRATOR FOLLOW-UP

Spoke with Petitioner Date of Meeting \_\_\_\_\_

Notes: \_\_\_\_\_