## CHARTER TOWNSHIP OF ORION PLANNING COMMISSION



2525 Joslyn Road Lake Orion, MI 48360 (248) 391-0304

## APPLICATION FOR TEXT AMENDMENT

Case Number PC- \_\_\_\_-

## NOTICE TO APPLICANT

The following application must be completed (incomplete applications will be returned to the petitioner) and filed with the Township at least four (4) weeks prior to a scheduled Planning Commission meeting in order to initiate a request for a Text Amendment.

Regular meetings of the Planning Commission are held on the first and third Wednesday of each month at 7:00 p.m. at the Orion Township Hall, 2525 Joslyn Road, Lake Orion.

Date: \_\_\_\_\_\_ Project Name\_\_\_\_\_\_

Applicants Name \_\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip Code\_\_\_\_\_

Phone#\_\_\_\_ Fax #\_\_\_\_\_ E-Mail\_\_\_\_\_

Requested Charter Township of Orion Ordinance Amendment:

Ordinance Number \_\_\_\_\_\_ Name\_\_\_\_\_\_

Section Number \_\_\_\_\_\_
Is the proposed Ordinance amendment a modification to existing language or new language?\_\_\_\_\_\_\_

**Statement of Purpose:** On a separate sheet of paper attach to the application the reasons why: 1. The text amendment is necessary; 2. The existing language is no longer appropriate, and 3. The text amendment will not be detrimental for the community.

\*\*10 Copies Of The Proposed Text Amendment, Statement Of Purpose And The Planning Commission Review Fee Found In Ordinance #41 Must Be Included As Part Of The Application \*\*

I hereby submit this application for a Te	ext Amendment, pursuant to the provisions of the
1	linance #78, Section 30.04 and any other ments. In support of the application, I hereby
11 1 1	rein is accurate and the application that has been
Signature of Applicant	Date

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