



7227 West Q Ave
Kalamazoo, MI 49009
P: 269-375-1591
F: 269-375-0791
www.texastownship.org

TEMPORARY USE APPLICATION ZONING ADMINISTRATOR REVIEW

I (we), the undersigned do hereby **submit the original application, review fee and five (5) copies** of a **site plan** for the purpose of obtaining **Temporary Use** and Approval. In making this application, I (we) acknowledge that the Township Planning Commission has discretion to impose reasonable terms and conditions as a condition of issuance of such permit.

Site Address: _____

Applicants Name: _____

Phone: _____ Email: _____

Mailing Address: _____

Property Owner (if different from applicant): _____

Phone: _____ Email: _____

Above Owner has consented to this application? Yes _____ No _____

General Description of Temporary Use:

Date of Event: _____ # of Days of Event: _____

In making this application, I (we) grant permission for the Zoning Administrator or other Texas Township official or representative to enter and inspect the subject property for the purposes related to this application.

Applicant Signature: _____ Date: _____

ZONING ADMINISTRATOR REVIEW	Approved _____	Denied _____
Reasons for Denial: _____		
Expires _____	Signature _____	Date _____