

**CITY OF SOUTHGATE**  
**SUBMITTAL REQUIREMENTS AND TIMEFRAMES**

**PLANNING COMMISSION:**

The Planning Commission meets the 2<sup>nd</sup> Monday of every other month. **Applicants must complete an Application for Planning Commission Review (Form No. 01).**

**Conditional Use Site Plan Review:** Please submit two separate checks for the following;  
**Filing Fee: \$500.00**  
**Escrow Fee: \$2000.00**

Please see the Development Review Process flow chart for the steps of approval. Once clearance is obtained from the Site Plan Review Committee, if necessary a completed application and **16 FULL SIZE BLUE PRINTS FOLDED** (rolled copies will not be accepted) should be submitted to the Building Department at least **28 DAYS** before the next regularly scheduled Planning Commission meeting.

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**Site Plan Review:** Please submit two separate checks for the following:  
**Filing Fee: \$500.00**  
**Escrow: \$1500.00**

Please see the Development Review Process flow chart for the steps of approval. Once clearance is obtained from the Site Plan Review Committee, if necessary a completed application and **16 FULL SIZE BLUE PRINTS FOLDED** (rolled copies will not be accepted) should be submitted to the Building Department at least **14 DAYS** before the next regularly scheduled Planning Commission meeting.

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**Rezoning Request:** Please submit two separate checks for the following:  
**Filing Fee: \$500.00**  
**Escrow: \$1500.00**

**Conditional Rezoning:** **Filing Fee: \$500.00**  
**Escrow: \$1500.00**

Please submit a completed application along with a parcel map **CLEARLY** depicting the property or properties being requested to be rezoned, as well as surrounding properties, nearest public streets, and a north arrow. Applications must be submitted to the Building Department at least **28 DAYS** prior to the next regularly scheduled Planning Commission meeting. A public hearing will be held and recommendation will be forwarded to the City Council for consideration. Applicant will be notified by mail of the council appearance date.

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**Public Right-of-Way Vacation:** **Filing Fee: \$500.00**

Please submit a completed application along with a parcel map **CLEARLY** depicting the property or properties being requested to be rezoned, as well as surrounding properties, nearest public streets, and a north arrow. Applications must be submitted to the Building Department at least **28 DAYS** prior to the next regularly scheduled Planning Commission meeting. A public hearing will be held and recommendation will be forwarded to the City Council for consideration. Applicant will be notified by mail of the council appearance date.

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**RETURN TO:**  
 Clerk's Office  
 City of Southgate  
 14400 Dix-Toledo  
 Southgate, MI 48195

Case No. PC \_\_\_\_\_

Date Received \_\_\_\_\_

## CITY OF SOUTHGATE APPLICATION FOR PLANNING COMMISSION REVIEW

Concerning a request to be heard before the Southgate Planning Commission on the following:

**TO BE COMPLETED BY THE APPLICANT:**

Owner/Applicant	Agent
Name _____	Name _____
Address _____	Address _____
(City) _____ (State) _____ (Zip) _____	(City) _____ (State) _____ (Zip) _____
Telephone _____	Telephone _____

**Information regarding the site:**

Street Address: \_\_\_\_\_

Major Cross Streets: \_\_\_\_\_

Parcel / Lot No.: \_\_\_\_\_

Acreage: \_\_\_\_\_ Dimensions of Parcel / Lot: \_\_\_\_\_ Frontage: \_\_\_\_\_

Current Zoning (please circle): RE R-1 R-1A R-1B RM RO C-1 C-2 C-3 M-1 MH PD P-1

Current Use: \_\_\_\_\_

**Requested action:**

Rezoning Requested District: \_\_\_\_\_

Conditional Use Approval Requested Use: \_\_\_\_\_

Site Plan Review

Plat Review

Other  
 Please Specify \_\_\_\_\_

**Information regarding request:**

I hereby request a hearing before this body to:

(Please supply detailed information. For example, why you are requesting the proposed action, a complete description of the project, how the request is compatible with adjacent land uses and zoning districts, how the request is in compliance with the goals, policies, and future land use plan of the City of Southgate Master Plan, any information you feel is pertinent to your application, etc. Feel free to attach additional documents to this application if it will help describe your project or if you need more room than is provided below.)

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**A SKETCH CLEARLY DEPICTING THE REQUEST MUST BE ATTACHED TO THIS APPLICATION FOR IT TO BE VALID. FOR SITE PLAN REVIEW, A SITE PLAN MEETING THE REQUIREMENTS OF SECTION 1298.07 MUST BE ATTACHED.**

The Applicant / Agent must appear before the Planning Commission on \_\_\_\_\_  
(Date)

**THE OWNER OF THE PROPERTY DESCRIBED ON THIS APPLICATION AND THAT ALL STATEMENTS HEREIN AND IN THE DOCUMENTS SUBMITTED ARE TRUE.**

Signature – Owner / Agent: \_\_\_\_\_ Date: \_\_\_\_\_

To review your application properly, Planning Commission members may need access to the property in question. Please initial if permission is given for property access. INITIALS \_\_\_\_\_

*Fees must be paid at the same time this application is submitted to the City.*

**OFFICE USE:**

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_  
(Staff's Name)

Fee Charged: \_\_\_\_\_

Check No.: \_\_\_\_\_ Receipt No.: \_\_\_\_\_