



215 WEST MAIN STREET  
NORTHVILLE, MI 48167  
(248) 449-9902

### SITE PLAN APPLICATION

Refer to Article 19 of the City of Northville Zoning Ordinance for Site Plan Review Procedures and Standards. (The Zoning Ordinance is available on the City’s website. <http://www.ci.northville.mi.us/Services/Building/ZoningOrdinance.asp>)

**See Page 4 for Application Submission requirements and Procedures for Appearing before the Planning Commission. Refer to the Development Review Fee Schedule on website for current fees (www.ci.northville.mi.us)**

Please check appropriate review to be completed:

**SITE PLAN REVIEW**

**CHANGE OF USE**  
(For proposed development  
which requires additional parking)

**MINOR SITE DEVELOPMENT**  
(Reviewed by City Manager, PC Chairperson,  
Planner)

**TO BE COMPLETED BY APPLICANT**

Name of Sponsor of Development: \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name of Site Planner: \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name of Contractor: \_\_\_\_\_ Builders License No: \_\_\_\_\_

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

Name of Engineer: \_\_\_\_\_

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

Telephone \_\_\_\_\_ Email \_\_\_\_\_

**\*Point of Contact for this Project/Application to Receive City Department Internal Reviews**

Point of Contact information must be provided in order to receive City Department Internal Reviews prior to the Planning Commission Meeting. Only ONE Point of Contact shall be designated. This person is responsible for forwarding the Internal Reviews to the interested parties. The Internal Reviews are sent via EMAIL.

Name \_\_\_\_\_ Email Address \_\_\_\_\_

**LOCATION OF PROJECT**

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

Cross Streets: \_\_\_\_\_ and \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot No: \_\_\_\_\_

Lot Size: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Located in the Historic District:  \*Yes  No \*IF YES, APPLICATION MUST ALSO BE MADE TO THE HISTORIC DISTRICT COMMISSION FOR APPROVAL.

APPLICATION IS FOR  Preliminary Approval  Final Approval

**TYPE AND COST OF BUILDING – All applicants must complete parts A – D**

**A. TYPE OF IMPROVEMENT:**

- 1. \_\_\_\_\_ New Building
- 2. \_\_\_\_\_ Addition (If residential, enter number of new housing units added, if any in part D 13)
- 3. \_\_\_\_\_ Alteration (see 2 above)
- 4. \_\_\_\_\_ Repair, replacement
- 5. \_\_\_\_\_ Demolition (If multi-family residential, enter number of units in building in part D 12)
- 6. \_\_\_\_\_ Moving (relocation)
- 7. \_\_\_\_\_ Foundation only

**B. OWNERSHIP**

- 8a. \_\_\_\_\_ Private (individual, corporation, non-profit instruction, etc.)
- 8b. \_\_\_\_\_ Public (Federal, State, or local government)
- 9. Proof of ownership (**required**). Proof shall consist of Title Insurance, Purchase Agreement. **Must** have names of the principal owners involved in any Corporation, Partnership, etc.

**C. COST:**

10. Total Cost of Improvement: \$ \_\_\_\_\_

To be installed and included in the above cost:

- a. Electrical \_\_\_\_\_
- b. Plumbing \_\_\_\_\_
- c. Heating, Air Conditioning \_\_\_\_\_
- d. Other (elevator, etc.) \_\_\_\_\_

**D. PROPOSED USE – for “demolition” indicate most recent use**

- |           |  |           |                                |
|-----------|--|-----------|--------------------------------|
| 11. _____ | One Family   | 19. _____ | Industrial                     |
| 12. _____ | Multi Family # of units _____                                  | 20. _____ | Parking                        |
| 13. _____ | Transient hotel, motel,<br>dormitory<br>enter # of units _____ | 21. _____ | Service station, repair garage |
| 14. _____ | Garage   | 22. _____ | Hospital, institutional        |
| 15. _____ | Carport  | 23. _____ | Office, bank-professional      |
| 16. _____ | Other – Specify _____  | 24. _____ | Public utility                 |
|           |  | 25. _____ | School, library, etc.          |
| 17. _____ | Amusement, recreational  | 26. _____ | Stores, mercantile             |
| 18. _____ | Church, other religious  | 27. _____ | Tanks, towers                  |
|           |  | 28. _____ | Other – Specify _____          |

NON RESIDENTIAL – describe in detail the proposed use of building, e.g. food processing plant, machine shop, laundry building or hospital, elementary school, college, parochial school, parking garage for department store, rental office building, office building at an industrial plant. If use of existing building is being changed, enter proposed use.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SELECTED CHARACTERISTICS OF BUILDING**

For new buildings and additions, applicant shall complete parts E – L. For demolition, applicant shall complete only part J.

**E. PRINCIPAL TYPE OF FRAME**

- |           |                        |           |                       |
|-----------|------------------------|-----------|-----------------------|
| 29. _____ | Masonry (wall bearing) | 32. _____ | Reinforced Concrete   |
| 30. _____ | Wood Frame             | 33. _____ | Other – Specify _____ |
| 31. _____ | Structural Steel       |           |                       |

**F. PRINCIPAL TYPE OF HEATING FUEL**

- |           |             |           |                       |
|-----------|-------------|-----------|-----------------------|
| 34. _____ | Gas         | 37. _____ | Coal                  |
| 35. _____ | Oil         | 38. _____ | Other - Specify _____ |
| 36. _____ | Electricity |           |                       |

**G. TYPE OF SEWAGE DISPOSAL**

- |           |                           |           |                             |
|-----------|---------------------------|-----------|-----------------------------|
| 39. _____ | Public or private company | 40. _____ | Private (septic tank, etc.) |
|-----------|---------------------------|-----------|-----------------------------|

**H. TYPE OF WATER SUPPLY**

- |           |                           |           |                         |
|-----------|---------------------------|-----------|-------------------------|
| 41. _____ | Public or private company | 42. _____ | Private (well, cistern) |
|-----------|---------------------------|-----------|-------------------------|

**I. TYPE OF MECHANICAL**

- |             |           |     |           |    |
|-------------|-----------|-----|-----------|----|
| Central Air | 43. _____ | Yes | 44. _____ | No |
| Elevator    | 45. _____ | Yes | 46. _____ | No |

**J. DIMENSIONS**

- |  |       |
|--|-------|
| 47. Number of stories  | _____ |
| 48. Total square feet of floor area, all floors based on exterior dimensions | _____ |
| 49. Total land area, square feet   | _____ |

**K. NUMBER OF OFF STREET PARKING SPACES**

- |                    |                    |
|--------------------|--------------------|
| 50. Enclosed _____ | 51. Outdoors _____ |
|--------------------|--------------------|

**L. BEDROOMS/BATHS**

52. Number of bedrooms \_\_\_\_\_

53. Number of baths \_\_\_\_\_ Full baths \_\_\_\_\_ 1/2 baths

**M. COMPLETE APPENDIX D “SITE PLAN REVIEW CHECK LIST” – Pages 5-9 of this application**

**Procedures to Appear Before the Planning Commission**

- Fill out the application with any backup documentation attached (i.e. blueprints, drawings, plot plans etc.)
- Make **20** copies of the application and backup documentation and assemble them into 20 identical packets. Application must be on top and backup documents must be folded to the same size as the application. **One PDF file (on cd or thumb drive) of site plans or document larger than 11”x17” must also be provided at time of submission.**
- Submit the documents to the Building Department no later than 4:00 p.m. the day of the deadline. The deadline to submit applications and documentation is **21** days prior to the meeting date. If this date falls on a Saturday or Sunday, plans need to be submitted on the Friday prior to the due date. Deadlines may also be moved due to holidays and newspaper publication schedules. Follow the submission schedule posted at the Building Department or on the City’s website ([www.ci.northville.mi.us](http://www.ci.northville.mi.us) – go to Government, Boards and Commissions, Procedures to Appear).
- Planning Commission meetings are held the 1<sup>st</sup> and 3<sup>rd</sup> Tuesdays of the month at 7:30 p.m. in the City Council Chambers. If there is a change in date or location, it will be posted on the City’s website and at City Hall.
- The applicant or a representative should be present at the meeting to answer any questions the commissioners may have. Presentation boards or other large items can be brought to the meeting to help the commissioners in the decision making process.

**APPLICATION CHECK LIST**

- Site Plan Application – completed in its entirety and signed. Unsigned applications are not accepted.
- Site plans, Sketches, etc. – hard copy
- Appendix D – Site Plan Review Checklist
- Proof of ownership (See page 2)
- All of the above assembled into 20 identical packets. Submissions in individual folders, binders etc. will not be accepted.
- One PDF file (on cd or thumb drive) of any sketch, site plan, or document larger than 11”x17” **(required)**
- Fee (see Development Review Fee Schedule)

*I hereby certify that the owner of record authorizes the proposed work and that the owner has authorized me to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction. The applicant hereby expressly acknowledges and agrees that by signing this document, the applicant is fully responsible for any and all fees, costs, and/or expenses which are associated with this application whether approval of the application is granted or not. In the event that the City of Northville is required to take any type of action, legal or otherwise, to collect any amount due or owing by the applicant, then the applicant expressly agrees to pay for any and all costs and expenses, including attorney fees, incurred by the City of Northville in having to collect any such amount due or owing by the applicant. **This section must be completed and signed or application will not be accepted.***

\_\_\_\_\_  
PRINT name of applicant

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print the applicant’s full legal name (individual or company)

\_\_\_\_\_  
Provide the applicant’s complete address

\_\_\_\_\_  
Relationship to owner

\_\_\_\_\_  
Phone #

**APPENDIX D**

**SITE PLAN REVIEW CHECKLIST**

To be Completed by Applicant A - G

**General Requirement of Overall Development Plan**

Submission shall consist of drawings shown at a scale of not less than 1 inch equals 50 feet on a standard sheet size of 24' x 36'. A scale of 1 inch equals 100 feet when conditions warrant or do not allow the use of the standard sheet size at a scale of 1 inch equals 50 feet may be permitted. Architectural elevations and floor plan details shall be drawn to a minimum scale of 1/8 inch equals 1 foot. The appropriate number of drawing/plans as provided in the adopted administrative rules together with the required application and fees shall be submitted to the Building Department. **One PDF file (on cd or thumb drive) of drawings must also be provided at time of submission.**

Included in the development plan shall be the following information. If required items of information are not applicable, the applicant shall indicate reason why the information is not necessary. The Planning Commission shall determine if a waiver for the required items of information is appropriate for preliminary and final site plan submittal.

**A. TITLE BLOCK INFORMATION**

1. Proprietor's Name and Address
2. Name of community where project is proposed
3. Scale of drawing
4. Revision block (month, day, year)
5. Name of Architect, Engineer, Surveyor, Landscape Architect or Planner and Professional Seal.
6. Legal Description of the Parcel

**INFORMATION**

Provided	Not Provided	Reason N/A

**B. LEGEND INFORMATION**

1. Area of Parcel Proposed for Development
2. Zoning Classification of the Site
3. If Residential, show density calculations (i.e.: dwelling units per acre or bedrooms per acre)
4. If Commercial or Industrial show gross and useable floor area
5. Proposed and Existing Land Uses
6. Number of Parking Spaces Provided and Number Required by the Zoning Ordinance
7. Number of Loading & Unloading Spaces if Required & Number Required by the Zoning Ordinance
8. Percent of Parcel Covered by Main & Accessory Buildings

**INFORMATION**

Provided	Not Provided	Reason N/A



**E. ARCHITECTURAL PLAN DETAILS**

1. Proposed architectural elevations
  
2. Floor plan layout to show:
  - a. Dwelling unit type (for multiples)
  - b. Useable floor space (for other)
  - c. Proposed use (for other)
  
3. Structural details for application of performance bonds

**INFORMATION**

Provided	Not Provided	Reason N/A

**INFORMATION**

Provided	Not Provided	Reason N/A

**F. LANDSCAPING, LIGHTING AND SIGN DETAILS**

1. Green spaces, screening walls and/or berms and fencing with details and cross-section around parking stations, trash receptacles, utility structures and for screening adjacent properties
  
2. Landscaping specifications showing planting materials, species and number noted in landscape legend
  
3. Exterior lighting with locations and methods of shielding
  
4. Directional signs, location and size and design
  
5. Advertising signs, location, size and design

**INFORMATION**

Provided	Not Provided	Reason N/A

**G. GENERAL REMARKS**

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**NOTE: FAILURE TO SUBMIT PLANS THAT DO NOT ALLOW THE PLANNING COMMISSION TO ADEQUATELY ADDRESS ALL THE CRITERIA PROVIDED FOR THE REVIEW BY THE PLANNING COMMISSION ACCORDING TO ARTICLE 19 OF THE ZONING ORDINANCE AND THE SITE PLAN CHECK LIST SHALL RESULT IN A DELAY TO THE APPLICANT.**





**CITY USE ONLY**

PLAN REVIEW RECORD

<u>Plan Reviews Required</u>	<u>Date Plans Approved</u>	<u>Approved By</u>
Building	_____	_____
Plumbing	_____	_____
Mechanical	_____	_____
Electrical	_____	_____
Police Department	_____	_____
Fire Department	_____	_____
City Engineer	_____	_____
Other	_____	_____

Building Permit # \_\_\_\_\_

**FOR DEPARTMENTAL USE ONLY**

Building Permit Issued \_\_\_\_\_  
(date)

Use Group \_\_\_\_\_

Building Permit Fee \$ \_\_\_\_\_

Fire Grading \_\_\_\_\_

Certificate of Occupancy \$ \_\_\_\_\_

Live Loading \_\_\_\_\_

Drain Title \$ \_\_\_\_\_

Occupancy Load \_\_\_\_\_

Plan Review Fee: \$ \_\_\_\_\_

Approved By:

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(title)