



City of Flint
Planning & Zoning Department
 1101 S Saginaw Street Room S105, Flint, MI 48502
 Phone: (810) 766-7426
www.cityofflint.com/departments/planning-and-zoning/

Fee: <u>\$1,002</u>
Date Rec'd: _____
Application #: _____
Meeting Date: _____

**Application for Special Land Use/Additionally Regulated Uses
(Does not include Marihuana Uses)**

<input type="checkbox"/> Special Land Use	<input type="checkbox"/> Additionally Regulated Use
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Property Address, Parcel ID Number(s), and Zoning	Property or Street Address:
	Parcel I.D. Number(s):
	Zoning District:

Project Description			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 2px;">Does project involve Specially Designated Merchant License, Specially Designated Distributor License, or other liquor license?</td> <td style="width: 15%; padding: 2px; text-align: center;"><input type="checkbox"/> Yes</td> <td style="width: 15%; padding: 2px; text-align: center;"><input type="checkbox"/> No</td> </tr> </table>	Does project involve Specially Designated Merchant License, Specially Designated Distributor License, or other liquor license?	<input type="checkbox"/> Yes
Does project involve Specially Designated Merchant License, Specially Designated Distributor License, or other liquor license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

Applicant <i>(Must have a legal interest in the property)</i>	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	<input type="checkbox"/> Own the property			
	<input type="checkbox"/> Lease the property, if so what is term of lease?	Years:	W/ options? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> Have offer to purchase property (attach purchase agreement)			
	<input type="checkbox"/> Other property interest: (e.g., architect, attorney, contractor, etc.)			

	Applicant Signature:			
Primary Contact <input type="checkbox"/> Same as applicant	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	Relationship to Applicant (e.g., architect, attorney, contractor, etc.)			
Property Owner <input type="checkbox"/> Same as applicant	Name:			
	Firm:			
	Address:			
	City:			
	State:		Zip Code:	
	Phone:		Email:	
	Relationship to Applicant (e.g., architect, attorney, contractor, etc.)			

Please note:

The non-refundable fee made payable to the City of Flint must accompany your preliminary application.

Prior to submitting an application, applicants may request a pre-filing conference(s) with the Zoning Coordinator and any other City official or employee designated by the Zoning Coordinator. Along with a formal application and required fee, an applicant must submit a statement indicating compliance of the proposed Special Land Use with the Master Plan.

Applications for a change in an existing structure to a Special Land Use, or other applications for procedures specifically calling for Special Land Use review shall require a Special Land Use Plot Plan. See page 5 for plot plan requirements.

All other Special Land Use applications and all Additionally Regulated Use applications shall include a scaled site plan in accordance with the requirements of [Section 50.17.06](#).

For reviews beyond the one preliminary and one final review will require a \$501 fee for each additional review. For further questions, please reference the City of Flint [Master Fee Schedule](#).

**Planning Commission Application for a Special Land Use or
Additionally Regulated Use**
Section 50.17.10

In addition to specific ordinance standards which may be applicable, the following standards shall serve as the basis for decisions involving special land uses, additionally regulated uses, and other discretionary decisions. As the applicant, please respond to items 1 through 6 below.

1. Please describe how the request complies with the City of Flint Zoning Ordinance and other applicable local, state and federal laws.

2. Please describe how the request is consistent with and promotes the intent of the chapter, the Master Plan and other adopted plans.

3. Please describe how the request is compatible with adjacent uses of land.

4. Please describe how the request is compatible with the natural environment.

5. Please describe how the request is consistent with the capabilities of public services and facilities affected by the proposed use.

6. Please describe how the request protects the public health, safety and welfare.

Special Land Use Plot Plan Requirements (Section 50.17.10.C.3.)				
Requirement	Does the Plot Plan Meet the Requirements?			
	Yes	No	N/A	Comments
1. A Special Land Use Plot Plan must be developed by an architect, engineer or surveyor licensed in the State of Michigan				
2. The actual shape, location and dimensions of the lot.				
3. The shape, length, width, height, area, lot coverage, and location of all buildings or other structures to be erected, altered or moved and of any building or other structures already on the lot. (See Article 3 or Article 4 depending on zoning district)				
4. The existing and intended use of the lot and all such structures upon it, including the number of dwelling units if applicable. See Article 3 or Article 4 depending on zoning district)				
5. All parking spaces (See Article 12)				
6. Landscaping and fencing (See Article 13 and Article 8)				
7. Signage details (See Article 15)				
8. Such other information concerning the lot or adjoining lots as may be essential for determining whether the provisions of this Ordinance are met.				