



Land Use Waiver
 Genoa Township • 2911 Dorr Rd. • Brighton, MI 48116
 Phone (810) 227-5225 • Fax (810) 227-3420

WAIVER NO. _____

1. PROJECT INFORMATION

Site Address: _____

2. OWNER/APPLICANT INFORMATION

Owner Name: _____ Phone No.: _____

Owner Address: _____ City: _____ State: _____ Zip: _____

Applicant is: Owner Contractor Lessee Architect/Engineer Other:

Applicant Name: _____ Phone No.: _____

Applicant Address: _____ City: _____ State: _____ Zip: _____

3. TYPE OF IMPROVEMENT

Demolition Water Connection Sewer Connection Interior Work/Repairs
 Driveway Roofing Basement Finish Other (please explain):

If interior work is being done, please complete the following:

_____ Square Feet of Improved Area _____ Full Baths (#) _____ Half Baths (#) _____ Fireplaces (Y/N)

4. SIGNATURE OF APPLICANT

I hereby certify that all information and data attached to and made part of this application are true and accurate and to the best of my knowledge and belief. I also certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent, and we agree to conform to all applicable laws, codes and ordinances of the State of Michigan and Genoa Township. Private covenants and restrictions are potentially enforceable by private parties. A Land Use Wavier is valid for a period of 12 months from the date of issue. Any modification to location, size, or dimensions must be approved by Genoa Township.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

1. ASSESSING APPROVAL

Approved Disapproved Approved by: _____ Date: _____

2. ZONING APPROVAL → → → → Parcel I.D. No.: _____ Zoning: _____

Approved Disapproved Approved by: _____ Date: _____

Comments/Conditions:

