



**Pittsfield Charter Township**  
**Department of Municipal Services**  
 6201 West Michigan Avenue, Ann Arbor, MI 48108  
 Phone: (734) 822-3130 Fax: (734) 944-1103  
 Website: www.pittsfield-mi.gov Email: planning@pittsfield-mi.gov

# Wetland Permit Application

Applicant Requirement Checklist
<input type="checkbox"/> Application Fee and Escrow Desposit. Application will not be processed until payment is received
<input type="checkbox"/> Application completed in full
<input type="checkbox"/> Thirteen (14) copies of proposed site plan. Three (3) full size plan sets, and Eleven (11) reduced plan sets. ( <i>Delineation of Wetland, or Verification of Wetland Delineation does NOT require site pan submittal</i> )
<input type="checkbox"/> A USB or CD containing the entire plan set

:: OFFICE USE ::
WP# _____ - _____
ZP App Fee \$ _____
Escrow Fee \$ _____
Total \$ _____

Submittal Information <b>Must be completed in full</b>	
<b>This application and site plan is being submitted for the following consideration:</b>	Date of Plan: _____
<input type="checkbox"/> Wetland Permit <input type="checkbox"/> Delineation of Wetland <input type="checkbox"/> Verification of Wetland Delineation	Number of Sheets: _____
Name of Proposed Development: _____	
Gross Acreage of Site: _____ Estimated Acreage of Wetland Area: _____ Estimated Acreage of Disturbed Wetland: _____	

Property Information	
_____ Or _____	_____
General Location of Site	Street Number Street Name
Parcel I.D. # 12 - _____ - _____ - _____	Gross Acreage of Site: _____ Net Acreage: _____

Applicant Information	
<b>(Please Print)</b>	
Company Name <b>(If Applicable)</b> _____	Applicant's Name _____
Address _____ City _____	State _____ Zip _____
(_____) _____ (_____) _____	_____
Contact Number _____ Fax Number _____	Email Address _____

Applicant's Permit Compliance Agreement	
The applicant(s) represents that they are the owner(s) of the subject property or are acting on behalf of the listed property owner, and herewith file fourteen (14) copies of the identified drawing of the property or site plan and all supporting material. The applicant also acknowledges that the filing of this application grants permission for Pittsfield Charter Township staff and/or officials to enter the property to determine the accuracy of the submitted information, including existing conditions.	
Applicant's Signature _____	Applicant's Name <b>(Please Print)</b> _____
Date _____	

Please Complete Reverse Side →

:: Office Use ::	Time Stamp
Received By: _____	
(Initials)	

<b>Escrow Contact Information</b> <span style="color: red;">Must be completed in FULL and information CURRENT</span>			
<b>(Please Print)</b>			
_____		_____	
Company Name		Contact Name	
_____	_____	_____	_____
Address	City	State	Zip
(_____)_____	(_____)_____	_____	
Contact Number	Fax Number	Email Address	

<b>Property Owner Information</b>			
<b>(Please Print)</b>			
_____		(_____)_____	
Property Owner's Name		Contact Number	
_____	_____	_____	_____
Address	City	State	Zip
_____		(_____)_____	
Email Address		Fax Number	
_____		_____	
Property Owner's Signature		Date	

<b>Site Planner/Engineer</b>			
<b>(Please Print)</b>			
_____		_____	
Company Name		Contact Name	
_____	_____	_____	_____
Address	City	State	Zip
(_____)_____	(_____)_____	_____	
Contact Number	Fax Number	Email Address	

Submittal by the application deadline does not guarantee placement on the agenda for the meeting date indicated on the meeting schedule.