

**CLARENDON TOWNSHIP PLANNING COMMISSION
CONDITIONAL USE APPLICATION AND PERMIT**

APPLICANT INFORMATION

1. _____
Individual and Business Name, if applicable
2. _____
Applicant Address, Phone Number
3. _____
Project Description, Purpose, Conditions for Use
4. _____
Project Location

TOWNSHIP PLANNING COMMISSION

The Township Planning Commission, after reviewing the above application,

- recommends **APPROVAL**
 DENIAL
 DEFERS DECISION PENDING ADDITIONAL INFORMATION

Subject to the following conditions:

- NONE**

_____ DATED: _____
Chairman, Planning Commission

TOWNSHIP BOARD

The Township Board, upon recommendation of the Township Planning Commission,

- hereby **APPROVES,**
 DENIES,

this Conditional Use Permit, subject to the listed conditions.

Effective Date: _____ Expiration Date: _____ **NONE**

Township Supervisor

ACCEPTANCE BY APPLICANT

I, we, do hereby accept and agree to all conditions established herein and set forth by the Township of Clarendon, Calhoun County, Michigan.

Applicant / Agent Signature

DISTRIBUTION:
♦Applicant
♦Township Clerk
♦Township Plan Commission

form: PC100 5/2010