

**COMMERCE TOWNSHIP
APPLICATION FOR RESIDENTIAL
ACCESSORY BUILDING HEARING**

Applicant _____	Phone _____
Address _____	
E-Mail Address _____	
Owner _____	Phone _____
Address _____	

Property Address and Location _____	
Sidwell Number _____	(Attach legal description on a separate sheet)
Property Dimensions _____	Area of Site _____
Dimensions of Proposed Building _____	
Area of Proposed Building _____	

Proposed Use of Building _____	
Total No. of Accessory Buildings(existing & Proposed) _____	
Total area of all Accessory Buildings _____	

I hereby grant Commerce Township personnel, involved with the review of this request, permission for reasonable entry onto the above property for investigations specifically related to this request.

Applicant _____ Date _____

Please Print _____

Owner _____ Date _____

Please Print _____

A certified survey, indicating lot lines, dimensions and location of existing and proposed buildings, existing and proposed landscaping and other relevant features must accompany this application.