

7-15-10

**CANNON TOWNSHIP
6878 BELDING ROAD NE
ROCKFORD MI 49341
616 874 6966 FAX 616 874 8940**

STAFF PRELIMINARY CONFERENCE

Date _____ Escrow # _____

Applicant _____

Project Location _____

of Acres _____ Proposed # of Units _____

Utilities: Please Circle

Individual Septic Community Septic Public Sewer Private Well System

Private Community Water System Natural Gas Cable TV

Roads: Public Private

Property Owner _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone Number _____ FAX _____

E-Mail _____

Project Engineer _____

Mailing Address _____

City _____ State _____ Zip _____

Phone Number _____ FAX _____

E-Mail _____

Fees \$500.00 staff/planner \$1,000.00 staff/planner/engineer/attorney

Receipt # _____

Received by _____

Meeting date _____

Planner _____

Engineer _____

Zoning Administrator _____