FULTON TOWNSHIP ZONING APPLICATION FORM

Application for: (check any that	* *
Rezoning	Subdivision
✓ Special Land Use	Land Division
Site Plan Review	Planned Unit Development
Variance (Board of Appeals	Other
Applicant Information Name Mission 1 Communications	
Phone 269-998-3364	FAXE-Mailtostling@m1comm.com
Address 940 Monrow Ave NW Un	it 461 Grand Rapids, MI 49503
Owner Information (If different Name State of Michigan – DTMB	t from applicant) -Center for Shared Solutions - Michigan's Public Safety Communications System
Phone517-284-4087	FAX 517-284-4066 . E-Mail aprillb@michigan.gov
	loor, A-Wing, Pillar E6 - Dimondale, Michigan 48821
	oning (Current) A-1 Property size
a 300' public saftey communiation	s proposing a 100'X100' lease area located on this parcel. On this 100'X100' area no tower will be constructed. Please see the attached site plans for specifics. tion on this application form is, to the best of my knowledge, true and 8/21/20
Signature of applicant	Date -
Board of Appeals), (Township Bo purposes of gathering informati and failure to grant permission	ission for members of the Fulton Township (Planning Commission), (Zoning board) or (Zoning Administrator) to enter the above described property for the ion related to this application. Note to applicant: This permission is optional will not affect any decision on your application.
Signature of applicant	Date 8/21/20
	OFFICE USE ONLY
	FEE PAID: LEGAL DESCRIPTION: