

Leighton Township

Allegan County, Michigan

APPLICATION FOR SITE PLAN REVIEW

PLEASE TYPE OR PRINT

Parcel Number(s)* of property: _____ Area of Parcel in acres: _____

* A legal description may be required

Applicant Information

Name: _____

Address: _____

City/State: _____ Zip: _____

Phone: (day) _____ (evening) _____

Owner (s) of Record, if different than applicant :

Name: _____

Address: _____

City/State: _____ Zip: _____

Phone: (day) _____ (evening) _____

NOTES:

Nine (9) copies of this application must be submitted to the Leighton Township Building Inspector along with the site plan. The content requirements of the site plan are detailed in Section 14A.04 of the Leighton Township Zoning Ordinance.

The fee for the site plan review will consist of a minimum fee plus township expenditures directly attributed to the review which exceed the minimum fee amount. An escrow account will be established in the amount determined by the Township to approximate the anticipated direct costs.

Rec'd On.: _____

Forwarded to Planning Comm.: _____

Required fee and escrow paid _____

Note: Payment of all outstanding expenditures will be required prior to any final authorizations or the issuance of permits.

Project Description: (Provide the number of structures and dwelling units, square footage of each building, number of parking spaces, estimated number of employees, and any unique features of the site or proposed development.) Attach a required site plan (See Sec. 14A.04 and consult with Zoning administrator). It is in your best interest to provide accurate and relevant information to document your position. Site plans for commercial and industrial and multiple development sites and many other complex proposals will not be accepted unless prepared by certified professionals.

I hereby state that all information above and attached is complete and accurate _____

Applicant Signature

NOTE: The above signature(s) authorize commencement of review activities by the Township of Leighton. It further authorizes that Township officials and its designees may visit, examine and photograph the subject property for the purpose of on-site analysis and/or inspection prior to making approving or denying the application and/or prior to, during and upon completion of construction or other activity governed by the township and pertaining to this application.

Date Approved: _____ Signature: _____

For Official Use Only

LEIGHTON TOWNSHIP
STATE/COUNTY ENVIRONMENTAL PERMITS CHECKLIST

This checklist has been prepared to alert businesses to state and county environmental permit requirements which may apply to new or existing facilities. Applicants are required to complete this form and submit it to the Leighton Township office with site plan applications. Leighton Township will use the information in its site plan review process as well as forward the information to:

*Permit Coordinator & Local Government Liason
Michigan Department of Environmental Quality
P.O. Box 30473, Lansing, MI 48909
Tel. 517/335-4235*

This checklist is not a permit application form. Businesses are responsible for obtaining information and permit application forms from the various state and county offices. Please note that this checklist pertains only to state and a county *environmental* permits. Site plan approval, zoning compliance, building permits and other approvals are required by the Township and may be required by other government agencies. Township approvals may be delayed until, or may be granted contingent upon, the receipt of all environmental permits and/or other government or agency approvals.

Circle the area of regulation which you think may apply to your business:

1. Y N Will the project involve the discharge of any type of wastewater to a storm sewer, drain, lake, stream or other surface water?

Contact: Michigan Department of Environmental Quality, Surface Water Quality Division: 616/685-9886.

2. Y N Will the project involve the discharge of liquids, sludges, wastewater and/or wastewater residuals into or onto the ground?

Contact: Michigan Department of Environmental Quality, Waste Management Division. District office: 616/685-0035.

3. Y N Will the project or facility store or use hazardous substances, oil or salt? Depending on the type of substance, secondary containment and Pollution Incident Prevention Plan (or a material storage permit) may be required.

Contact: Michigan Department of Environmental Quality, Waste Management Division. District office: 616/685-0035.

4. Y N Will the facility use underground storage tanks? New and existing tanks must be registered with the Michigan department of Environmental Quality. Tanks must be installed, operated, maintained, closed and removed in accordance with state regulations.

Contact: Michigan Department of Environmental Quality, Underground Storage Tank Division. District office: 616/692-2120.

5. Y N Will the facility store flammable or combustible liquids in a fixed storage container with a capacity greater than 1100 gallons?

Contact: Michigan State Police Fire Marshal Division, field office: 616/657-5571.

6. Y N Does your facility store pesticide or fertilizer in quantities greater than 55 gallons or 100 pounds? Do you mix and load pesticides at your facility more than 10 days in any single calendar year?

Contact: Michigan Department of Agriculture, Pesticide & Plant Pest Division.

Telephone in Lansing: 517/335-6544.

7. Y N Will the facility involve the transport, on-site treatment, storage or disposal of hazardous waste generated in quantities of 1000 kilograms (250 gallons or 2200 pounds) or more per month? If yes, one or more permits may be required.

Will the facility generate between 100 kilograms/month (25 gallons or 220 pounds) and 1000 kilograms/month (250 gallons or 2200 pounds) of hazardous waste? If yes, the facility may be a small quantity generator, subject to federal and state regulations. An EPA identification number should be obtained from the Michigan Department of Environmental Quality (special forms are available) and a manifest (shipping paper) should be used to transport waste off-site.

Contact: Michigan Department of Environmental Quality, Waste Management Division, district office telephone: 616/685-0035.

8. Y N Will the project involve burning, land filling, transferring or processing any type of solid non-hazardous wastes on-site?

Contact: Michigan Department of Environmental Quality, Waste Management Division. District office telephone: 616/685-0035.

9. Y N Will the project involve the installation, construction, reconstruction, relocation, or alteration of any process or process equipment (including air pollution control equipment) which has the potential to emit air contaminants?

Contact: Michigan Department of Environmental Quality, Air Quality Division, Permit Section. District office telephone: 616/685-9886.

10. Y N Will the project involve any man-made change in the natural cover or topography of land, including cut and fill activities which may contribute to soil erosion and sedimentation? Will the earth change disturb an area of one acre or more, or occur within 500 feet of a lake or stream? If the

answer to both of these questions is yes, a soil erosion and sedimentation control permit is required.

Contact: Allegan County Drain Commissioner: 616/673-0440.

11. Y N Will the project involve any work (dredging, filling, construction) in a river, stream, creek, ditch, wetland or flood plain or within 500 feet of an inland lake, river, stream, creek or ditch?

Contact: Michigan Department of Environmental Quality, Land and Water Management Division. District office telephone: 616/685-6851.

12. Y N Will the site be connected to the public sanitary sewer system?

Y N Will an on-site wastewater treatment system or septic system be installed?

Y N Will seepage be stored on-site prior to off-site disposal?

Contact: For septic systems - Allegan County Health Department: 616/673-5411.

For industrial/commercial wastewater in any quantity of more than 10,000 gallons/day of sanitary sewage - Michigan Department of Environmental Quality, Waste Management Division. District office telephone: 616/456-5071.

For connection to the Door-Leighton Sanitary sewer system- 616/877-4196.

13. Y N Is this facility (or any facility under your ownership) currently involved in any compliance discussions with the Michigan Department of Environmental Quality or the Michigan Attorney General's Office?

Contact: Michigan Department of Environmental Quality, Office of Environmental Enforcement. Telephone: 517/373-3503.

14. Y N Is this facility/property (or any

facility/property under your ownership) included on the Act 307 Priority List, "Michigan Sites of Environmental Contamination" or subject to corrective action under the Leaking Underground Storage Tank (LUST) program?

Contact: Michigan Department of Environmental Quality, Environmental Response Division.
District office telephone: 616/692-2120.

Note: For assistance with permits and approvals from the Michigan Department of Environmental Quality, contact the Permit Coordinator, Lansing Central office (517) 335-4235.

Business Name:

Type of Business:

Mailing Address:

Street Address:

Facility Owner or Manager:

Telephone: _____ *Fax Number:* _____

Signature (agent or owner)

Date: