



**TEXAS TOWNSHIP**  
7110 West Q Avenue  
Kalamazoo, Michigan 49009  
P: 269.375.1591  
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## **CO-LOCATION ON EXISTING TOWERS/STRUCTURES ZONING AND SITE PLAN APPROVAL**

### **APPLICATION FORM**

Please review the [Texas Township ClearZoning Ordinances](#) that pertain to your project prior to submission of your application.

### **PROPERTY AND PROJECT INFORMATION**

**Street Address:** \_\_\_\_\_

**Parcel Number:** 3909-\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Tower / Site Number:** \_\_\_\_\_

**List all Existing Carriers:** \_\_\_\_\_

**General Description of Proposed Development:**

### **APPLICANT INFORMATION** (Person or organization requesting the approval.)

**Applicant Name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Applicant Interest:** \_\_\_\_\_ Property Owner    \_\_\_\_\_ Purchaser by Option of Purchase Agreement  
                                  \_\_\_\_\_ Lessee/Tenant        \_\_\_\_\_ Purchaser by Land Contract

**LEGAL OWNER INFORMATION** \_\_\_\_\_ Check here if the applicant is also the property owner.

**Legal Owner of Parcel:** \_\_\_\_\_

**Legal Owner's Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**REPRESENTATIVE INFORMATION**

**Representative Name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**AUTHORIZATION & SIGNATURE**

I (we), the undersigned do hereby submit one packet that includes: completed and signed application, site plan and any other necessary drawings, supporting documentation, and review fee for the purpose of obtaining administrative approval. In making this application, I (we) acknowledge that the Township Zoning Administrator has discretion to impose reasonable terms and conditions as may be allowed by the Township Zoning Ordinance and as a provision of any considered approval.

**Signature of Legal Property Owner:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Office Use Only:**

**Date Received:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Received By:** \_\_\_\_\_

**App Fee Paid:** \$ \_\_\_\_\_ **Check #:** \_\_\_\_\_