



PRE-APPLICATION MEETING REQUEST
City of Novi Community Development Department
 45175 W. Ten Mile, Novi, MI 48375
 248-347-0475; 248-735-5633 fax
www.cityofnovi.org

- Site Plan Approval
- Special Land Use
- Rezoning
- PRO
- SDO

Project Name (Working Title)

Use Tab function to navigate form. Point and click cursor to check boxes.

Check all that apply

APPLICANT

Company	Primary Contact	Professional License Number, if applicable
Street Address	Suite	City
	State	Zip
Phone Number	Fax Number	E-mail address

Site Location (north/south of which road, east/west of which road)	Parcel Number(s) (Contact Assessing Dept. if unknown)
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Meeting Date <i>(You may call 248-347-0475 to set this date up prior to your submittal)</i>	Meeting Time
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SUBMITTAL REQUIREMENTS

Pre-Application Submittal Requirements:

- For proposed site plans and PRO's seven sealed and folded sets of available plans, preferably including site plan, elevations, floor plans, engineering, wetland, woodland, landscape, lighting and stormwater management plans. Size of plans must be 24" x 36", maximum scale of 1" = 50'.
- For rezonings, proposed rezoning engineering survey and brief narrative describing any potential future development.
- Original signed copy of this application.
- Date for Pre-Application Meeting provides an approximate ten-day review window (between submittal date and meeting date), and can be arranged upon submittal or by calling 248-347-0475.

I do hereby attest that all statements, signatures, descriptions, and exhibits submitted with this application are true and accurate to the best of my knowledge and I am the property owner or I am authorized to file this application and act on behalf of the property owner, and at the time of Preliminary Site Plan submittal I will provide a notarized statement from the owner who grants me permission to act on his/her behalf. I acknowledge that by making this application I have consented to the entry of City officials, employees, agents, and/or representatives for all purposes in connection with this application and to insure compliance with City Ordinances.

 Signature of Applicant Date

 Printed Name of Applicant

- Distribution List:**
- | | | | |
|-------------|---------|----------|--------------------------------|
| Planning | Traffic | Wetland | Fire |
| Engineering | Façade | Woodland | Planning Assistant - form only |
| Landscape | Police | | |