

**Freedom Township
Land Division or Boundary Adjustment Application
Freedom Township Zoning Ordinance 9.0**

A. Applicant's Name: _____
Address: _____
Telephone Number: _____

B. Names and Addresses of all record owners, interest, type of ownership:

C. The applicant's interest in the property, and if the applicant is not the owner of record then a signed authorization from the owner: _____

D. Legal Description, include number of acres and major crossroads: _____

Address of Property: _____
Tax Parcel Number of the Property: _____
Present Use of Property: _____

E. A copy of the most current tax bill must be provided.

F. A detailed description of the proposed project: _____

G. A list of any restrictions or deed covenants

H. A detailed site plan showing the current with the new division or boundary adjustment with all applicable legal description

Date Received _____
Received By _____
Fee Amount Paid _____

Applicant Signature

Date Received by Freedom Township Planning Commission: _____
THE FREEDOM TOWNSHIP PLANNING COMMISSION has reviewed the particular circumstances of the above proposed use relative to all applicable Sections of the Freedom Township Zoning Ordinance, on the following dates of all meeting held relative to this matter: _____

And (approve) (disapprove) same on (date) _____ 20____
The Conditions imposed on a conditional use approval or denial herein are set forth in, and any Breach of such conditions by the applicant shall automatically invalidate this permit: _____

Planning Commission Chair

Planning Commission Secretary