

**VILLAGE OF OXFORD**  
**Planning Commission**  
 22 West Burdick, P.O. Box 94  
 Oxford, MI 48371-0094  
 248-628-2543



## SITE PLAN REVIEW APPLICATION

A site plan submitted for review and approval shall contain all of the following data prior to its submission. Site plans shall consist of an overall plan for the entire development. All plans must be legible and sufficient quality to provide for reproduction.

Article 9, Chapter 1 of the Zoning Ordinance, has been provided in order to ensure that all site plan information and requirements have been provided by the applicant for Planning Commission review. Missing information could result in a delay in plans being reviewed by the Planning Commission until all required information has been provided.

Applicant must provide **15 copies** of the site plan, application, fees, and all relative documents at least twenty-five (25) days prior to the next regularly scheduled meeting of the Planning Commission.

DATE \_\_\_\_\_ PROJECT ADDRESS \_\_\_\_\_

**APPLICANT INFORMATION**

<b>Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Cell:</b>	
<b>Email:</b>		

**PROPERTY OWNER INFORMATION**

<b>Name:</b>		
<b>Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone:</b>	<b>Cell:</b>	
<b>Email:</b>		

If applicant is not the owner, describe applicant's interest in the property. (Proof of ownership OR affidavit is required.)

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<b>PROPERTY DESCRIPTION</b>
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Description of Proposed Project:			
Zoning Classification:	<input type="checkbox"/> R-1 Single Family	<input type="checkbox"/> C-1 Central Business – Core	
	<input type="checkbox"/> RM Multiple Family	<input type="checkbox"/> C-1 Central Business - Transition	
	<input type="checkbox"/> I-1 Industrial	<input type="checkbox"/> C-2 General Business	
		<input type="checkbox"/> P-1 Vehicular Parking	
Present Use:		Proposed Use:	
Front Yard Setback	ft.	Building Height	ft.
Side Yard Setback	ft.	Lot Coverage (%)	%
Rear Yard Setback	ft.	Total Floor Area	sq. ft.
Lot Size	sq. ft.	Off Street Parking	cars

<b>PROFESSIONALS WHO PREPARED DRAWINGS</b>
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Name:			
Mailing Address:			
City:		State:	Zip:
Telephone:		Email:	
Design Responsibility:			
Name;:			
Mailing Address:			
City:		State:	Zip:
Telephone:		Email:	
Design Responsibility:			

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**ATTACH THE FOLLOWING:**

1. 15 folded copies of the site plan, sealed by a registered architect, engineer, or landscape architect.
2. Digital copies of application, site plan, and all supporting documentation.
3. A brief written description of the existing and proposed uses, including but not limited to: hours of operation, number of employees on largest shift, number of company vehicles, etc.
4. Proof of property ownership or interest in property (purchase agreement, etc.)
5. Fees:                   Based on acreage of proposed development. Contact Village for total fees to be paid.
6. If necessary, review comments or approval received from county, state, or federal agencies that have jurisdiction over the project, including but not limited to:
  - Oakland County Road Commission                    Michigan Department of Environmental Quality
  - Oakland County Health Department                    Oakland County Drain Commissioner
  - Michigan Department of Natural Resources

**PLEASE NOTE:** The applicant or a designated representative **MUST BE PRESENT** at all scheduled review meetings or the site plan may be tabled due to lack of representation.

Failure to provide true and accurate information on this application shall provide sufficient grounds to deny approval of a site plan application or to revoke any permits granted subsequent to site plan approval.

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**APPLICANT'S ENDORSEMENT**

All information contained herein is true and accurate to the best of my knowledge. I acknowledge that the Planning Commission will not review my application unless all information required in this application and the Zoning Ordinance have been submitted. I further acknowledge that the Village of Oxford and its employees or agents shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this site plan application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

**VILLAGE USE ONLY**

\_\_\_\_\_ 1. Complete Zoning Compliance Form

\_\_\_\_\_ 2. Complete Special Use Application

\_\_\_\_\_ 3. Receive 15 Copies of Site Plan

\_\_\_\_\_ 4. Distribute Plans to:

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Planner      | <input type="checkbox"/> Building Official            |
| <input type="checkbox"/> Engineer     | <input type="checkbox"/> DPW Dept.                    |
| <input type="checkbox"/> Fire Dept.   | <input type="checkbox"/> DDA (if within DDA District) |
| <input type="checkbox"/> Police Dept. | <input type="checkbox"/> Planning Commission (7)      |

\_\_\_\_\_ 5. Planning Commission Meeting Date: \_\_\_\_\_

\_\_\_\_\_ 6. Notice for Public Hearing

\_\_\_\_\_ 7. Receive Reviews:

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Planner      | <input type="checkbox"/> Building Official            |
| <input type="checkbox"/> Engineer     | <input type="checkbox"/> DPW Dept.                    |
| <input type="checkbox"/> Fire Dept.   | <input type="checkbox"/> DDA (if within DDA District) |
| <input type="checkbox"/> Police Dept. |   |

\_\_\_\_\_ 8. Planning Commission Decision:

- Approved
- Denied
- Approved with Conditions (attached)

\_\_\_\_\_ 9. Building Permit Application Received

\_\_\_\_\_ 10. Building Permit Approved by Building Official

**NOTES**

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