ALLEGAN COUNTY HEALTH DEPARTMENT

3255 – 122nd Avenue, Suite 200, Allegan, MI 49010
Environmental Health Division Phone: (269) 673-5415 FAX:(269) 673-4172
Email: AlleganEH@allegancounty.org

Date
Receipt
Amount

RAW LAND AND PRELIMINARY PLAT APPLICATION

	Raw Land Evaluation	$225.00			Preliminary Plat	$700.00			# of Lots x $20 per lot	$ _____

PROPERTY OWNER INFORMATION

Name of Property Owner_____
Address _____City _____ Zip Code_____
Phone _____ Email _____

APPLICANT INFORMATION (IF DIFFERENT FROM OWNER)

Name _____Company _____
Address _____ City _____ Zip Code _____
Phone_____ Email _____

PROPERTY LOCATION INFORMATION

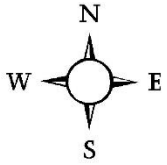
TAX/PARCEL ID 03-_____-_____-_____-_____ Township _____
Address _____ (if assigned) City _____ Zip Code_____
Subdivision _____ Lot # _____ Section # _____ Width _____ Length_____ Acres _____

Raw Land Evaluation: (per site) This applies to property which is not intended to be built within a year. Prior to construction a new septic system construction permit will be necessary.

Signature Required: _____ Date: _____

SITE PLAN DRAWING

All submitted applications must be accompanied with a site plan drawing.



IT IS OUR GOAL TO PROCESS ALL APPLICATIONS WITHIN 14 BUSINESS DAY