



SAUGATUCK TOWNSHIP

WWW.SAUGATUCKTOWNSHIP.ORG

3461 BLUE STAR HIGHWAY
P.O. BOX 100
SAUGATUCK, MI 49453

PHONE (269) 857-7721
FAX (269) 857-4542

APPLICATION OF REVIEW / APPROVAL OF BOUNDARY LINE ADJUSTMENT

1. Applicant Information:

Name _____

Address _____ City _____ State _____ Zip _____

Telephone _____ Fax _____

2. Property Information:

Address: _____

List all current Parcel #'s : 0320- - - _____

Do you own the parcel? Yes _____ ; No _____ ; Current Zoning _____

3. Engineer or Surveyor Information (if required):

Name _____ Address _____

City _____ State _____ Zip _____ Phone _____ License

Applications with completed survey and other required information must be filed with the Township Clerk at the Township Office at least 30 days before the scheduled Board meeting. By signing this application, I agree to pay all applicable fees and costs associated with the Boundary Line review process and will provide all information requested.

Applicant Signature _____

Date _____