

CHARTER TOWNSHIP OF FLUSHING

6524 N. Seymour Road, Flushing, MI 48433

P (810) 659-0800 F (810) 659-4212

www.flushingtowship.com

PLANNING COMMISSION AGENDA

DATE: JUNE 12, 2023

TIME: 7:00 P.M.

MEMBERS OF PLANNING COMMISSION

Chair – Vicki Bachakes

Craig Davis

Vice Chair – William Mills

Timothy Lloyd

Secretary – Amy Bolin

Michael Moon

Board of Trustees Representative – Terry A. Peck

Makenzie Dearlove, Recording Secretary

I. CALL THE MEETING TO ORDER

ROLL CALL

PLEDGE OF ALLEGIANCE

II. APPROVAL OF AGENDA

III. APPROVAL OF PREVIOUS MINUTES

May 8, 2023 Meeting

IV. PUBLIC COMMENTS FOR AGENDA ITEMS ONLY

Each speaker limited to three minutes

V. UNFINISHED BUSINESS

None

VI. NEW BUSINESS

1. Motion on the Discretionary Special Use Permit for Veteran's Mechanical LLC in pursuit to placing a plumbing, heating and air conditioning contractor - sales and service at 8034 N. McKinley Road, Flushing, MI 48433, Parcel No. 08-02-300-033, pursuant to Article XVIII Special Use Permits
2. Motion on the Special Use Permit to extend the fence into the front yard at 6377 N. Seymour Road, Flushing, MI 48433, Parcel No. 08-15-100-023, pursuant to Article XVIII Special Use Permits

VII. PUBLIC COMMENTS

Each speaker limited to three minutes

VIII. ZONING ADMINISTRATOR COMMENTS

IX. COMMISSION COMMENTS

X. NEXT REGULAR SCHEDULED MEETING

MONDAY, JULY 10, 2023 AT 7:00 P.M.

XI. ADJOURNMENT



CHRISTOPHER J. CZYZIO, Zoning Administrator

CHARTER TOWNSHIP OF FLUSHING

6524 N. SEYMOUR ROAD, FLUSHING, MI 48433

P (810) 659-0800

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PLANNING COMMISSION MINUTES

DATE: MAY 8, 2023

TIME: 7:00 P.M.

MEMBERS OF PLANNING COMMISSION

Chair – Vicki Bachakes

Craig Davis

Vice Chair – William Mills

Timothy Lloyd

Secretary – Amy Bolin

Michael Moon

Board of Trustees Representative – Terry A. Peck

Makenzie Dearlove, Recording Secretary

PRESENT: Lloyd, Bolin, Mills, Bachakes, Moon, Davis and Peck

ABSENT: None

OTHERS PRESENT: Thirteen (13) other individuals were present.

I. MEETING CALLED TO ORDER at 7:00 P.M. by Planning Commission Chairperson Bachakes with Roll Call and Pledge to the American Flag.

II. APPROVAL OF AGENDA:

COMMISSIONER PECK MOVED, supported by Commissioner Bolin to approve the agenda.

THE MOTION CARRIED UNANIMOUSLY.

III. APPROVAL OF PREVIOUS MINUTES:

COMMISSIONER PECK MOVED, supported by Commissioner Mills to approve the amended minutes of the April 10, 2023 meeting, changing Voigt to Mills in the minutes approval.

ACTION ON THE MOTION

AYES: 7

NAYS: 0

ABSENT: 0

THE MOTION CARRIED UNANIMOUSLY.

IV. PUBLIC COMMENTS

OPEN FOR PUBLIC COMMENTS 7:01 P.M.

No comments were made.

CLOSED FOR PUBLIC COMMENTS 7:02 P.M.

V. UNFINISHED BUSINESS

None

VI. NEW BUSINESS

1. Discussion regarding the Site Plan for Flushing Bibi Villas

Chairperson Bachakes asked Zoning Administrator Chris Czyzio to speak on the project. Mr. Czyzio stated he'd been in conversation with the developers of the Flushing Bibi Villas and they are still working on revisions to the site plan. They have removed one of the driveways to be able to make their plans work with the 40' setbacks. Mr. Czyzio is hopeful all the revisions will be completed and ready for review at the next meeting.

NO MOTION WAS MADE.

2. Motion on the Special Use Permit to place an Accessory Structure in the front yard at 3107 N. Seymour Road, Flushing, MI 48433, Parcel No. 08-34-300-009, pursuant to Article XVIII Special Use Permits

The property owner, Michael Blaszkowski, was in attendance and answered several questions from the commissioners. After further discussion, the following motion was made.

COMMISSIONER DAVIS MOVED, supported by Commissioner Peck to approve the Special Use Permit to place an Accessory Structure in the front yard at 3107 N. Seymour Road, Flushing, MI 48433, Parcel No. 08-34-300-009, pursuant to Article XVIII Special Use Permits.

ACTION ON THE MOTION

ROLL CALL VOTE:

AYES: Bolin, Mills, Bachakes, Moon, Davis, Peck and Lloyd

NAYS: None

ABSENT: None

THE MOTION CARRIED UNANIMOUSLY.

3. Discussion on the proposed Short-Term Rental Ordinance

Commissioner Bachakes asked Zoning Administrator Chris Czyzio to speak on the project. Mr. Czyzio stated that the suggestions from the last meeting have been made to the draft in order to provide more clarity for the residents. Mr. Czyzio also stated that he has researched where the ordinance would fall into our Code of Ordinances to become a police power. Mr. Czyzio informed the commission that with the approval of the ordinance, the user fee schedule and zoning district uses table would need revision to include the ordinance. After further discussion, the following motion was made.

COMMISSIONER PECK MOVED, supported by Commissioner Mills to send the proposed Short-Term Rental Ordinance to the Board of Trustees.

ACTION ON THE MOTION

ROLL CALL VOTE:

AYES: Mills, Bachakes, Moon, Davis, Peck, Lloyd and Bolin

NAYS: None

ABSENT: None

THE MOTION CARRIED UNANIMOUSLY.

VII. PUBLIC COMMENTS

OPEN FOR COMMENTS: 7:17 P.M.

One comment was made suggesting changes that could be made to the Flushing Bibi Villas Site Plan to address the concerns previously shared by other residents.

CLOSED FOR COMMENTS: 7:21 P.M.

VIII. ZONING ADMINISTRATOR COMMENTS

Mr. Czyzio addressed the resident that made the public comment stating the developer of the Flushing Bibi Villas seemed open to hearing the public's comments and ideas but are able to move forward as long as the zoning requirements are met. Mr. Czyzio also stated that he has been working on a commercial wind ordinance and overseeing many other township activities.

IX. COMMISSION COMMENTS

Chairperson Bachakes welcomed new Planning Commission member Michael Moon and stated she would be attending a zoning seminar this week with several other people from the Township Offices. Commissioner Peck spoke briefly on the other developments completed by the same people who are working on the Flushing Bibi Villas and some of the future projects they will be taking on in our area.

X. NEXT REGULAR SCHEDULED MEETING

MONDAY, JUNE 12, 2023 AT 7:00 P.M.

XI. ADJOURNMENT

With no further business, the meeting adjourned at 7:25 P.M.

VICKI BACHAKES, Chairperson

AMY BOLIN, Secretary

Date of Approval

Makenzie Dearlove, Recording Secretary

DRAFT

ZONING PERMIT

CHARTER TOWNSHIP OF FLUSHING
6524 N. Seymour Road
Flushing, Michigan 48433
810-659-0800 Fax 810-659-4212

Receipt # _____
Date: _____
Permit Fee: _____
Initial: _____

APPLICANT TO COMPLETE ALL ITEMS IN SECTIONS. NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED FOR BUILDING, PLUMBING, MECHANICAL, AND ELECTRICAL PERMITS IF REQUIRED. SOIL EROSION PERMIT THROUGH GENESEE CTY.

Parcel # 08-02-300-033

Estimated Value of Structure \$ _____

LOCATION OF BUILDING

STREET LOCATION: 8034 N. McKinley Rd ZONING DISTRICT: _____
CITY: Flushing STATE: Mi ZIP: 48433 OWNERSHIP: Private Public
between mt Morris Rd and France Rd. LOT SIZE: _____

TYPE OF IMPROVEMENT: RESIDENTIAL PROPOSED USE: NON-RESIDENTIAL PROPOSED USE:

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> NEW BUILDING | <input type="checkbox"/> ONE FAMILY | <input type="checkbox"/> AMUSEMENT | <input type="checkbox"/> LIBRARY |
| <input type="checkbox"/> ALTERATION | <input type="checkbox"/> TWO OR MORE FAMILY ___# UNITS | <input type="checkbox"/> CHURCH, RELIGION | <input type="checkbox"/> STORE, MERCANTILE |
| <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> HOTEL, MOTEL ___# UNITS | <input type="checkbox"/> INDUSTRIAL | <input type="checkbox"/> TANKS, TOWERS |
| <input type="checkbox"/> FOUNDATION ONLY | <input type="checkbox"/> ADDITION <input type="checkbox"/> SIGN | <input type="checkbox"/> PARKING GARAGE | <input type="checkbox"/> PUBLIC UTILITY |
| <input type="checkbox"/> MOBILE HOME SET-UP | <input type="checkbox"/> POOL <input type="checkbox"/> FENCE | <input type="checkbox"/> SERVICE STATION | <input type="checkbox"/> HOSPITAL/INSTITUTE |
| <input type="checkbox"/> PRE-MANUFACTURE | <input type="checkbox"/> ATTACHED/DETACHED GARAGE | <input type="checkbox"/> OFFICE, BANK | <input type="checkbox"/> SIGN |
| <input type="checkbox"/> SPECIAL INSPECTION | <input type="checkbox"/> DECK <input type="checkbox"/> POND | <input checked="" type="checkbox"/> PROFESSIONAL | |
| <input type="checkbox"/> RELOCATION | <input type="checkbox"/> STORAGE SHED | <input type="checkbox"/> RETENTION AREA | |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> POLE BUILDING | | |
| <input type="checkbox"/> REPAIR | <input type="checkbox"/> OTHER _____ | <input type="checkbox"/> OTHER _____ | |

NON-RESIDENTIAL DESCRIBE IN DETAIL PROPOSED USE OF BUILDING, E.G. FOOD PROCESSION PLANT, MACHINE SHOP, LAUNDRY BUILDING, PARKING, GARAGE FOR DEPARTMENT STORE. IF USE OS EXISTING BUILDING IS BEING CHANGED ENTER PROPOSED USE.
Warehousing and office space for Veteran's mechanical A. H. V. A. C. company

CHARACTERISTICS OF BUILDING

PRINCIPAL TYPE OF FRAMING: Masonry (wall bearing) Wood frame Structural steel Reinforced concrete

NUMBER OF OFF-STREET PARKING: Enclosed _____ Outdoors 4 to 6 Other: _____

RESIDENTIAL BUILDINGS ONLY: Number of Bedrooms _____ Number of bathrooms _____ Number of partial bathrooms _____

DIMENSIONS

No. of Stories _____ Total square feet of floor area _____ Total land area square feet/acres _____

IDENTIFICATION OF APPLICANT

APPLICANT IS RESPONSIBLE FOR ALL FEES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION:

OWNER OR LESSE: William Lincoln ADDRESS: 8617 Tim Tam Trl.

CITY: Flushing STATE: Mi ZIP: 48433 PHONE NUMBER: _____

CONTRACTOR: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE NUMBER: _____

BUILDERS LICENSE # _____ EXPIRATION DATE: _____

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN, GENESEE COUNTY AND THE TOWNSHIP OF FLUSHING, ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT: William Lincoln DATE: 5/8/23

SITE PLAN: USE BELOW SPACE OR ATTACH SITE PLAN

- LABEL STREETS
- LABEL FRONT YARD LINE
- LABEL SIDE YARD LINES
- LABEL REAR YARD LINE
- EXISTING BLDGS
- DISTANCE BETWEEN BLDGS
- DISTANCE TO YARD LINES
- LABEL DIRECTION N/S/W/E
- DISTANCED BETWEEN EXISTING AND PROPOSED STRUCTURES

The site plan area is mostly blank with some faint, illegible text and a signature that reads "William Lincoln". There are also some very faint markings that appear to be "810-RED-411" and "810-RED-411" written vertically on the left side.

APPROVAL SIGNATURE: _____ **DATE:** _____

SPECIAL USE PERMIT REQUEST FORM

Special Use Permit Request Cas No. _____
Variance Fee: 65000
Date Paid: REC #40318 5/9/23
Date Notice was Published: _____
Date of Public Hearing: 6/12/23
Affidavit Attached: _____

PAID

MAY 09 2023

CHARTER TOWNSHIP
OF FLUSHING

FLUSHING TOWNSHIP PLANNING COMMISSION SPECIAL USE PERMIT REQUEST

Required information from owner or person having interest in requesting Planning Commission (PC) review and opinion.

1. Name of applicant/owner requesting PC review and opinion

A. Applicant

Name: Veteran's Mechanical LLC
Address: 8617 Tim TAM +RL
Flushing MI 48433
Phone: [REDACTED]

B. Owner of property (if different than above)

Name: William Lincoln
Address: 8617 Tim TAM +RL
Flushing MI 48433
Phone: [REDACTED]

2. Location of Property

Street number and name: 8034 N. McKinley Rd.
Property tax identification number: 08-02-300-033
Legal description of property involved: _____

List deed restrictions and easements: _____

Present zoning of property: C-2

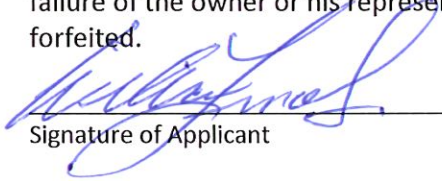
3. With all requests, a site plan must be submitted (se attached stie plan form)

4. Answer the following questions of the affidavit:

a. What is the purpose of the request for a Special Use Permit?

to HAVE AS A BASE OPERATION FOR VETERANS
MECHANICAL FOR OFFICE SPACE AND STORAGE OF
PARTS FOR AIR CONDITIONING, FURNACE'S

ACKNOWLEDGEMENT AND CERTIFICATION: It is hereby acknowledged that the applicant(s) has fully read and completed the above application. It is also understood that in case of cancellation or failure of the owner or his representative to appear at the hearing, I understand that all fees will be forfeited.



Signature of Applicant

Signature of Owner (If different than the applicant)

PLANNING COMMISSION:

The Planning Commission (PC) having reviewed the submitted data do hereby:

() APPROVE () DISAPPROVE the application for the following reasons: _____

If approved, are there conditions? _____

Date

Chairperson

This form and any required site plan MUST be completed in full and turned into Flushing Township **30 DAYS BEFORE THE SCHEDULED** Planning Commission meeting date to insure all Commission members have the necessary information:

PAID
MAY 09 2023

Date of Next Meeting: 6-12-23

Fee Due: CHARTER TOWNSHIP OF FLUSHING

Date Paid: 5/9/23

Paperwork Due By: _____

Amount Paid: \$650.00

Receipt #: 40318

COMMERCIAL SITE PLAN REVIEW CHECKLIST

Name of Applicant: William Lincoln Veterans Mechanical

Mailing Address: 8617 Tim-Tam Trl Flushing MI 48433

Property Address: 3034 N. McKinley Road Flushing MI 48433

Parcel Number: 08-02-300-033

Proposed Use: Office space & warehousing Heating, Cooling, Generators Filters

Existing Zoning: C-2

Section 36-1902 Site Plan Review Requirements:

Before any Permit shall be issued, a site plan drawn to a scale of one (1) inch equals twenty (20) feet, and at least two (2) copies of this site plan shall be submitted to the township clerk. **Such site plan drawing shall contain ALL of the following information:**

PLEASE PLACE AN ANSWER IN EVERY BOX UNDER PROPOSED.

ORDINANCE REQUIREMENTS	COMMISSIONERS REVIEW	APPLICANT'S PROPOSAL
(a) Statistical data including: number of dwelling units, size of dwelling units (e.g., one-bedroom, two-bedrooms, and three-bedrooms), if any, and total gross acreage involved. In all other cases, the location, type, horsepower, fuel, dimensions, and other data of all machinery to be used on the proposed site.		yes
(b) The location of principal and accessory buildings on the lot and the relationship of each structure to the other.		yes
(c) Vehicular traffic and pedestrian circulation features within and without the site.		yes
(d) The location and dimensions of all off-street parking areas including maneuvering lanes, service lanes, off-street loading spaces and other service areas within the development.		yes
(e) The location, dimensions and proposed use of all on-site recreation areas, if any.		N/A
(f) The location of all proposed landscaping, fences or walls.		N/A
(g) The height and dimensions of all structures.		yes
(h) Front, rear and side elevations of any typical structure proposed for development.		N/A

Site Plan Review Checklist

<p>(i) The location and capacity of private or public water and sanitary services and solid waste disposal facilities servicing the site.</p>		<p>NO</p>
<p>(j) The locations, dimensions and lighting of all signs.</p>		<p>YES</p>
<p>(k) The location, intensity and orientation of all lighting.</p>		<p>YES</p>
<p>(l) A location map indicating the relationship of the site to the surrounding land use for an area of not less than one (1) square mile.</p>		<p>YES</p>
<p>(m) A physiographic map showing the natural topography, the soil types, and suitability for intended use, natural features such as wood lots, lakes, drains, streams, and ditches, and surface coverage data (such as paved areas and structures) related to storm water runoff characteristics.</p>		<p>N/A</p>
<p>(n) The site plan shall be sealed by a professional engineer, architect, landscape architect or community planner.</p>		<p>N/A</p>
<p>(o) Location and size of interior and exterior areas and structures to be used for storage use, loading/unloading, recycling, or disposal of hazardous substances.</p>		<p>N/A</p>
<p>(p) Location of all underground and above ground storage tanks for such uses as fuel storage, waste oil holding tanks, chemical storage, hazardous waste storage, collection of contaminated storm water or wash water, and all similar uses.</p>		<p>N/A</p>

Site Plan Review Checklist

<p>(q) Location of exterior drains, dry wells, catch basins, retention/detention areas, sumps and other facilities designed to collect, store to transport storm water or waste water. The point of discharge for all drains and pipes shall be specified on the site plan.</p>		<p>N/A</p>
<p>(r) Delineation of areas on the site which are known or suspected to be contaminated, together with a report on the status of site cleanup.</p>		<p>N/A</p>
<p>(s) Submission of the "Hazardous Substances Reporting Form for Site Plan Review."</p>		<p>N/A</p>
<p>(t) Submission of the "State/County Environmental Permits Checklist."</p>		<p>N/A</p>
<p>(u) 100 year floodplain.</p>		<p>N/A</p>
<p>(v) Topographic lines at 1' intervals.</p>		<p>N/A</p>
<p>(w) Proposed and existing utilities including water, sewer, storm water and lighting.</p>		<p>NO</p>
<p>(x) Driveway location.</p>		<p>yes</p>
<p>(y) Current zoning of parcel and if the proposed use is not permitted in the district the parcel is zoned, an indication as to the proposed zoning. (Amended by adoption July 25, 2002).</p>		<p>yes</p>
<p>(z) Statement on the plan as to whether wetlands exist on the site. (Added by adoption July 25, 2002).</p>		<p>NO</p>
<p>(aa) Easements impacting property.</p>		<p>NO</p>
<p>(bb) Underground utilities present on property.</p>		<p>NO</p>

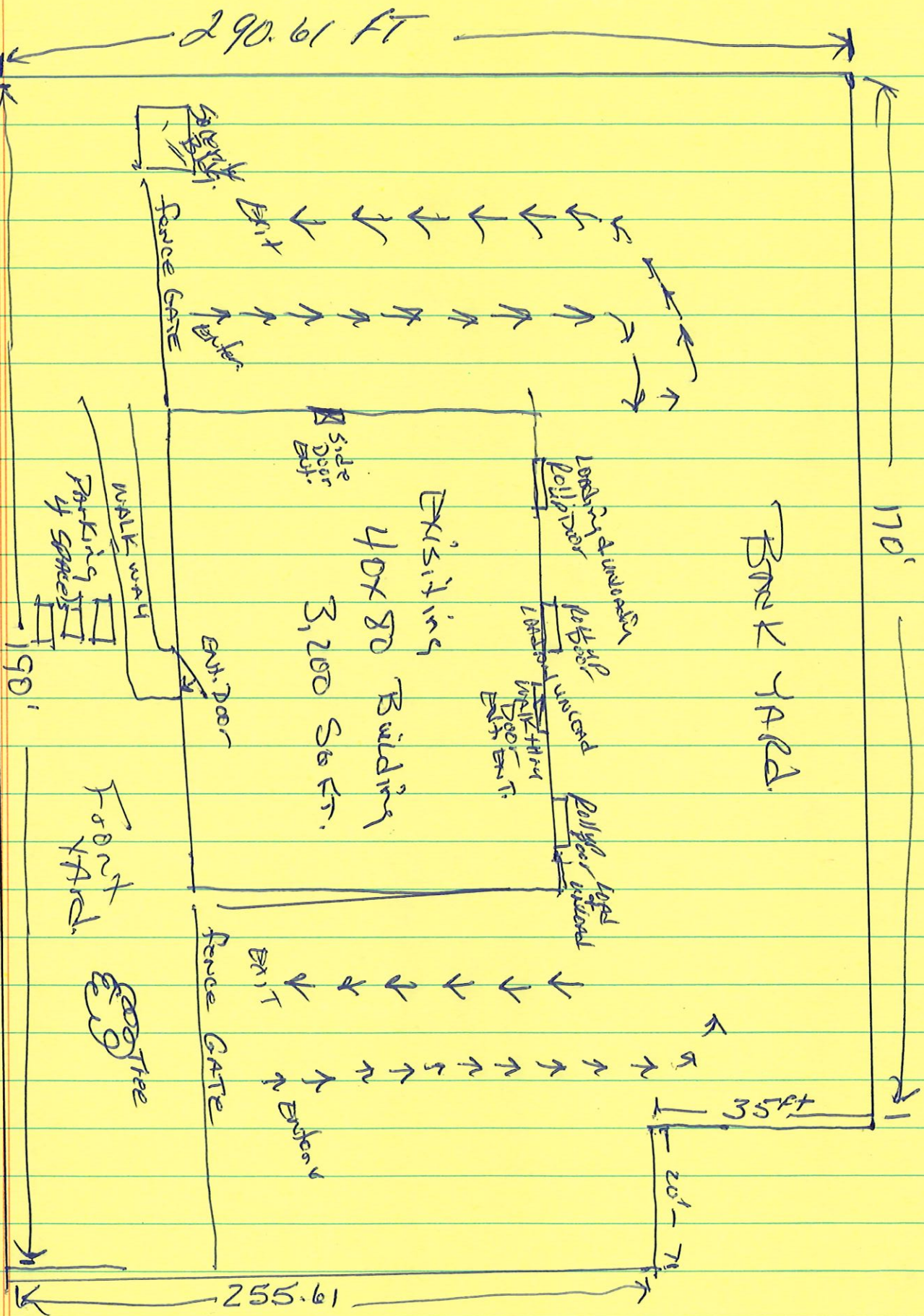
NOTE: Review the Flushing Township Code of Ordinances Section 36 Article 19: Site Plan for additional information.

ADDITIONAL COMMENTS:

Signature of Approving Planning Commission Chair

Date Approved

N McKindley Rd



MT Morris Rd.

Site Plan Review Checklist

This form and any required site plan **MUST** be completed in full and turned into Flushing Township **30 DAYS BEFORE THE SCHEDULED** Planning Commission meeting date to insure all Commission members have the necessary information:

Date of Next Meeting: ~~June 12, 2023~~ June 12, 23 WM Fee Due: \$650.00
Paperwork Due By: May 11-23 Date Paid: _____
Amount Paid: _____
Receipt #: _____

RESIDENTIAL SITE PLAN REVIEW CHECKLIST

Name of Applicant: Donna J Finch
Mailing Address: 6377 N. Seymour Rd
Property Address: 6377 N. Seymour Rd
Parcel Number: 08-15-100-023
Proposed Use: Fence in front yard
Existing Zoning: BSA

Section 36-1902 Site Plan Review Requirements:

Before any Permit shall be issued, a site plan drawn to a scale of one (1) inch equals twenty (20) feet, and at least two (2) copies of this site plan shall be submitted to the township clerk. **Such site plan drawing shall contain ALL of the following information:**

PLEASE PLACE AN ANSWER IN EVERY BOX UNDER PROPOSED.

<p>ORDINANCE REQUIREMENTS</p>	<p>COMMISSIONERS REVIEW</p>	<p>APPLICANT'S PROPOSAL</p>
<p>(a) Statistical data including: number of dwelling units, size of dwelling units (e.g., one-bedroom, two-bedrooms, and three-bedrooms), if any, and total gross acreage involved. In all other cases, the location, type, horsepower, fuel, dimensions, and other data of all machinery to be used on the proposed site.</p>		<p>Site Plan</p>
<p>(b) The location of principal and accessory buildings on the lot and the relationship of each structure to the other.</p>		<p>Site Plan</p>
<p>(c) Vehicular traffic and pedestrian circulation features within and without the site.</p>		<p>N/A</p>
<p>(d) The location and dimensions of all off-street parking areas including maneuvering lanes, service lanes, off-street loading spaces and other service areas within the development.</p>		<p>N/A</p>
<p>(e) The location, dimensions and proposed use of all on-site recreation areas, if any.</p>		<p>N/A</p>
<p>(f) The location of all proposed landscaping, fences or walls.</p>		<p>Site Plan</p>
<p>(g) The height and dimensions of all structures.</p>		<p>Site Plan</p>
<p>(h) Front, rear and side elevations of any typical structure proposed for development.</p>		<p>Site Plan</p>

Site Plan Review Checklist

<p>(i) The location and capacity of private or public water and sanitary services and solid waste disposal facilities servicing the site.</p>		<p>N/A</p>
<p>(j) The locations, dimensions and lighting of all signs.</p>		<p>N/A</p>
<p>(k) The location, intensity and orientation of all lighting.</p>		<p>N/A</p>
<p>(l) A location map indicating the relationship of the site to the surrounding land use for an area of not less than one (1) square mile.</p>		<p>N/A</p>
<p>(m) A physiographic map showing the natural topography, the soil types, and suitability for intended use, natural features such as wood lots, lakes, drains, streams, and ditches, and surface coverage data (such as paved areas and structures) related to storm water runoff characteristics.</p>		<p>N/A</p>
<p>(n) The site plan shall be sealed by a professional engineer, architect, landscape architect or community planner.</p>		<p>N/A</p>
<p>(o) Location and size of interior and exterior areas and structures to be used for storage use, loading/unloading, recycling, or disposal of hazardous substances.</p>		<p>N/A</p>
<p>(p) Location of all underground and above ground storage tanks for such uses as fuel storage, waste oil holding tanks, chemical storage, hazardous waste storage, collection of contaminated storm water or wash water, and all similar uses.</p>		<p>N/A</p>

Site Plan Review Checklist

<p>(q) Location of exterior drains, dry wells, catch basins, retention/detention areas, sumps and other facilities designed to collect, store to transport storm water or waste water. The point of discharge for all drains and pipes shall be specified on the site plan.</p>		<p>N/A</p>
<p>(r) Delineation of areas on the site which are known or suspected to be contaminated, together with a report on the status of site cleanup.</p>		<p>N/A</p>
<p>(s) Submission of the "Hazardous Substances Reporting Form for Site Plan Review."</p>		<p>N/A</p>
<p>(t) Submission of the "State/County Environmental Permits Checklist."</p>		<p>N/A</p>
<p>(u) 100 year floodplain.</p>		<p>N/A</p>
<p>(v) Topographic lines at 1' intervals.</p>		<p>N/A</p>
<p>(w) Proposed and existing utilities including water, sewer, storm water and lighting.</p>		<p>Side Plan</p>
<p>(x) Driveway location.</p>		<p>Side Plan</p>
<p>(y) Current zoning of parcel and if the proposed use is not permitted in the district the parcel is zoned, an indication as to the proposed zoning. (Amended by adoption July 25, 2002).</p>		<p>N/A</p>
<p>(z) Statement on the plan as to whether wetlands exist on the site. (Added by adoption July 25, 2002).</p>		<p>N/A</p>
<p>(aa) Easements impacting property.</p>		<p>Side Plan</p>
<p>(bb) Underground utilities present on property.</p>		<p>Side Plan</p>

SPECIAL USE PERMIT REQUEST FORM

Special Use Permit Request Cas No. _____
Variance Fee: _____
Date Paid: _____
Date Notice was Published: _____
Date of Public Hearing: _____
Affidavit Attached: _____

FLUSHING TOWNSHIP PLANNING COMMISSION SPECIAL USE PERMIT REQUEST

Required information from owner or person having interest in requesting Planning Commission (PC) review and opinion.

1. Name of applicant/owner requesting PC review and opinion

A. Applicant

Name: Jerilyn L Finch
Address: 6377 N. Seymour Rd
Phone: [REDACTED]

B. Owner of property (if different than above)

Name: Donna Finch
Address: 6377 N. Seymour Rd
Phone: [REDACTED]

2. Location of Property

Street number and name: 6377 N. Seymour Rd
Property tax identification number: 08-15-100-023
Legal description of property involved: 6377 N. Seymour Rd

List deed restrictions and easements: N/A

Present zoning of property: RSA

3. With all requests, a site plan must be submitted (se attached stie plan form)

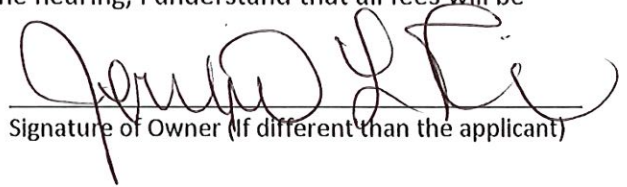
4. Answer the following questions of the affidavit:

a. What is the purpose of the request for a Special Use Permit?

I'm asking for (20 feet) ^{left foot} extension on Fence
both north & south sides of property
lines for mother's safety she
has dementia & has been wandering
on both sides neighbors property.
I'm asking this to be done for her
safety & everyone else's safety.
Please & Thank you
Jennifer Lee

ACKNOWLEDGEMENT AND CERTIFICATION: It is hereby acknowledged that the applicant(s) has fully read and completed the above application. It is also understood that in case of cancellation or failure of the owner or his representative to appear at the hearing, I understand that all fees will be forfeited.


Signature of Applicant


Signature of Owner (if different than the applicant)

PLANNING COMMISSION:

The Planning Commission (PC) having reviewed the submitted data do hereby:

() APPROVE () DISAPPROVE the application for the following reasons: _____

If approved, are there conditions? _____

Date

Chairperson

FENCE PERMIT

CHARTER TOWNSHIP OF FLUSHING

6524 N. Seymour Road

Flushing, Michigan 48433

810-659-0800 Fax 810-659-4212

Receipt # _____

Date: _____

Permit Fee: _____

Initial: _____

APPLICANT TO COMPLETE ALL ITEMS IN SECTIONS.

Parcel # 08-15-100-023

Estimated Value of Fence \$ 40,206

LOCATION OF FENCE

STREET LOCATION: 6377 N. Seymour Rd ZONING DISTRICT: Flushing Township
CITY: Flushing STATE: MI ZIP: 48433

GENERAL REQUIRED INFORMATION:

OWNERSHIP: Private Residential Public Private Commercial

LOT SIZE: _____ LOT FRONTAGE: _____

TYPE OF FENCE: _____ MATERIAL: _____

HEIGHT: _____ TOTAL LENGTH: _____

IDENTIFICATION OF APPLICANT

APPLICANT IS RESPONSIBLE FOR ALL FEES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION:

OWNER OR LESSEE: Donna Finch ADDRESS: 6377 N. Seymour Rd
CITY: Flushing STATE: MI ZIP: 48433 PHONE NUMBER: [REDACTED]

CONTRACTOR: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE NUMBER: _____

BUILDERS LICENSE # _____ EXPIRATION DATE: _____

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN, GENESEE COUNTY AND THE TOWNSHIP OF FLUSHING, ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT: Donna J Finch DATE: April-19-23

PERMIT DENIED, 6' FENCE CAN NOT EXTEND INTO FRONT SETBACK
VIOLATION OF SEC 36-408(G)

[Signature]
5/8/23

SITE PLAN: USE BELOW SPACE OR ATTACH SITE PLAN

- LABEL STREETS
- LABEL FRONT YARD LINE
- LABEL SIDE YARD LINES
- LABEL REAR YARD LINE
- EXISTING BLDGS
- LABEL DIRECTION N/S/W/E

**** INCLUDE ALL LOT DIMENSIONS****

APPROVAL SIGNATURE: _____ **DATE:** _____



PROPOSAL

MICHIGAN FENCE COMPANY, INC.

G-3059 West Hill Rd.
Flint, MI 48507

Phone: (810) 235-4581
Fax: (810) 235-9348

Name Jerilyn Finch

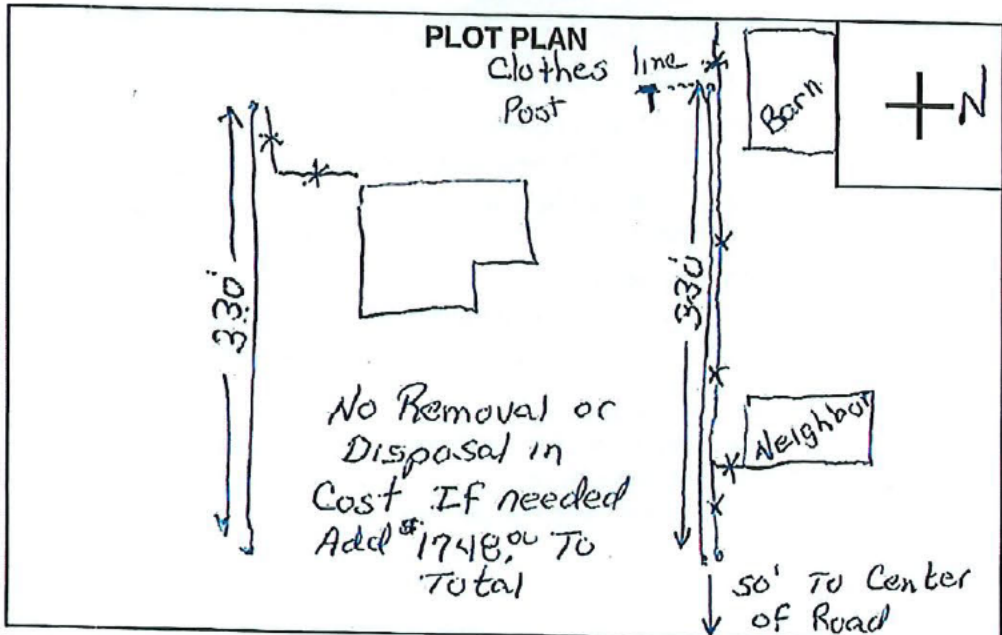
Date 5-2-23

Address 6377 N. Seymour Rd

City - State - Zip Code Flushing 48433

Phone _____ Job Address _____

SPECIFICATIONS:	
() Steel	<u>Bufftech</u>
() Wood	<u>white</u>
() Alum.	<u>Chesterfield</u>
() Other	_____
Footage	<u>660'</u>
Fence Height	<u>72"</u>
Fabric Gauge	_____
Barbs	_____
Top Rail	_____
Line Posts	<u>5"x5"</u>
Corner Posts	<u>5"x5"</u>
End Posts	<u>5"x5"</u>
Gate Posts	_____
Gate Posts	_____
Wall Thickness	_____
Gates	_____
Gates	_____
Concrete	<u>All Posts</u>
TOTAL PRICE	<u>\$40,286.⁰⁰</u>
DEPOSIT	<u>1/2 dn</u>
BALANCE	_____
TERMS	<u>upon Completion</u>



CONDITIONS OF AGREEMENT:

- Owner to carry fire and other necessary insurance. Our employees are fully covered by Workmen's Compensation Insurance.
- Quotations are subject to change or withdrawal at any time without notice.
- Additional charges will be made for abnormal digging conditions or for removal of existing fencing, bushes, trees or other obstructions on fence lines. Removal and disposal of excavated soil from boring holes shall be customer's responsibility.
- If erection is suspended at customer's request, any lost time and the expense of time and travel to return to complete the job is to be charged to the customer.
- Should the buyer cause unreasonable delay in the performance of this contract, the seller shall have the right to invoice the purchaser for the full sales value of the material delivered or in process, together with the selling price of the erection work performed.
- Michigan Fence Company, Inc. retains the rights to any and all material installed on or delivered to the customer's property until the balance of the agreed upon price is paid in full. In the event that the balance is not paid in full, the customer gives Michigan Fence Company, Inc. permission to remove the installed fence or the delivered material at the customer's expense.
- A Service Charge of 1 1/2% per month (18% per year) will be added to all contracts over 30 days unless otherwise stated above. We are members with the National Revenue Corporation. Accounts over 60 days may be turned over for collection.

Permit By Owner

Authorized Signature Randy Deeter

ACCEPTANCE OF PROPOSAL

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlines above.

Signature _____

Signature _____

Date _____

GUARANTEE
All workmanship and material guaranteed for a period of 1 year from the date of installation.

MICHIGAN FENCE COMPANY, INC.
CUSTOMER RESPONSIBILITIES & JOB DESCRIPTIONS
Installation Checklist

All property lines to be staked and established by the purchaser. An estimator may assist the customer in locating property stakes, however, the customer is responsible for the final fence line stakes prior to installation. Changes from the original estimate may affect price.

Installer shall call Miss-Dig for location of underground utilities, however, the customer is responsible for location and marking of all other buried cables and/or any underground obstructions not designed by Miss-Dig. Some of these cables and/or obstructions may be, but are not limited to cable TV lines, underground sprinkler lines, swimming pool electrical and water lines, and electrical, gas, or telephone lines from house to garages or other building.

Customer to clear a path 2' to 3' wide along all fence lines of any obstructions such as trees, bushes, rocks, boats, trailers, etc. Remember the height of the fence to be installed. **If work area is not ready for fence installation upon arrival of work crew, there will be an additional \$250.00 charge added to the total cost.**

It is the customer's responsibility to obtain permission for any hookups to any existing fences.

Customer to acquire necessary building permits, unless other arrangements are made with the salesman and it is initialed below, and be aware of any city or township codes such as height requirements, setbacks, etc.

Removal and disposal of excavated soil from boring holes will not be hauled away. Unless other arrangements are made with salesman, excess dirt will be spread along fence line.

Chain Link Installations Top rail to be straight, or
 Top rail to follow contour of the ground (top may not be level).
 Fabric to be a maximum of _____ inches off the ground.

Wood or PVC Installations: Top of fence to be straight, or
 Boards to follow contour of the ground (top may not be level).
 Boards to be a maximum of _____ inches off the ground.
 Terrace or stepped – longer posts required.

?
 Type of Top on Boards and/or posts:

<u>PVC Post Caps</u>	<u>Boards</u>	<u>Wood Posts</u>
<input type="checkbox"/> Ball Cap	<input type="checkbox"/> Plain Top	<input type="checkbox"/> Plain Top
<input type="checkbox"/> Gothic Cap	<input type="checkbox"/> Dog-Earred	<input type="checkbox"/> Dog-Earred
<input type="checkbox"/> External Flat Cap	<input type="checkbox"/> Gothic	<input type="checkbox"/> Gothic
<input type="checkbox"/> New England Cap	<input type="checkbox"/> French Gothic	<input type="checkbox"/> French Gothic
<input type="checkbox"/> Internal Flat Cap		<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____		

Type of enclosure:
 Inside enclosure (good side to face customer),
 If allowed by city or township codes.
 Outside enclosure (good side to face neighbors).

When ready sign this sheet, sign & date proposal and return to our office with a deposit check for 1/2 down.

I UNDERSTAND AND ACCEPT THE ABOVE LISTED CUSTOMER RESPONSIBILITIES AND THE CHAIN LINK AND/OR WOOD AND/OR PVC FENCE JOB INSTALLATION DESCRIPTIONS.

Customer's Signature _____

This document was prepared by:
Donna Jean Finch
6377 N Seymour Rd
Flushing, Michigan 48433

Return To:
Donna Jean Finch
6377 N Seymour Rd
Flushing, Michigan 48433

DURABLE POWER OF ATTORNEY
OF
DONNA JEAN FINCH

I. PRINCIPAL AND ATTORNEY-IN-FACT

I, Donna Jean Finch, who reside at 6377 N Seymour Rd, Flushing, Michigan 48433, appoint the following person to serve as my attorney-in-fact, to act for me in any lawful way with respect to the subjects indicated below:

Jerilyn Lee Finch
City, State of Residence: Fenton, Michigan

II. EFFECTIVE TIME

This power of attorney is effective immediately, and will not be affected by subsequent disability or incapacity of the principal or lapse of time. This is a durable power of attorney.

- 8) Authority to Record, Register, or File. My attorney-in-fact may record, register, or file this power of attorney and other necessary and appropriate documents as required to carry out the powers granted herein.
- 9) Copies. A copy of this power of attorney shall be effective as an original for all purposes.

IN WITNESS WHEREOF, the undersigned has executed this power of attorney on the date set forth below.

Date: July 3, 2020

Donna Jean Finch
Signature of Donna Jean Finch

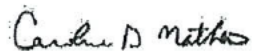
**Caroline Mathew MD
4212 LENNON RD
FLINT MI 485071080**

05/12/2023

To whom it may concern:

Donna Finch is a current patient of mine, last seen for an appointment on 05/12/2023. She has been diagnosed with Dementia and she has a tendency to wander from her home. For her safety, it is my recommendation that she have a privacy fence.

Sincerely,



Caroline D Mathew MD