



**CITY OF MADISON HEIGHTS  
COMMUNITY DEVELOPMENT DEPARTMENT  
PETITION FOR USE PERMITTED BY  
SPECIAL APPROVAL**

<b>FOR OFFICE USE ONLY</b>	
Request <u>PSP 24-003</u>	No: _____
Date <u>3/27/24</u>	Filed: _____
Approved by _____	CDD: _____
Approved for Hearing: _____	

I (we) the under signed, do hereby apply and petition the City of Madison Heights for a Special Approval Use Permit and provide the following information.

(Application must be typed)

Building Address: 28245 John R Tax ID No.: 44 - 25 - - -

**APPLICANT INFORMATION**

Name: Steve Gunn  
Phone No.: 586-292-0662 Fax No.: n/a  
Mailing Address: 28245 John R. City, State, Zip: Madison Heights, MI 48071  
(Notices will be mailed to this address)  
Driver's License No.: G 500 777 603 564 Date of Birth: 7-17-1978  
Interest in Property: Owner

**BUILDING & BUSINESS INFORMATION**

Zoning District: B-3 Use Requested Pursuant to Section \_\_\_\_\_ of the Zoning Ordinance  
Explain Requested Use in Detail: Replace existing 4 widely spaced exterior vacuums with one new central indoor vac system able to run 8 exterior vacuum spots.

The above referenced parcel is known as: (Lots(s) Acreage Parcel (s)) lots 1-9 of kenmos park  
Subdivision (if platted lot(s)) and is located on the N S E W (Circle One) side of \_\_\_\_\_ Street/Road between \_\_\_\_\_ Street/Road and \_\_\_\_\_ Street / Road.

Hours of Operation: 7:30-8:00  
Property Frontage: 220 Width/Depth: 117 No. of Parking Spaces: 3 Private Lot \_\_\_\_\_ Shared Lot \_\_\_\_\_  
No. of Floors: 1 Max. No. of Employees: 2 Male \_\_\_\_\_ Female \_\_\_\_\_ No. on Largest Single Shift: 2  
No. of Seats for Restaurant or Assembly Uses: n/a Capacity of Waiting Area: n/a  
Building: New \_\_\_\_\_ or Existing X Will Additions or Alterations to the Building be Required? no  
Explain: no alterations to the building  
Describe Any Other Site Improvements to be Made: n/a

Building Owner Name: Steve Gunn Phone No.: 586-292-0662 Fax No.: \_\_\_\_\_  
Mailing Address: 28245 John R City: madison heights Zip: 48071  
(Notices will be mailed to this address)

**Note: All blanks and boxes above must be completed. Use N/A where appropriate.**  
**CONTINUED ON REVERSE SIDE**



**PETITION FOR USE PERMITTED BY  
SPECIAL APPROVAL (Continued)**

Include one (1) copies of a site plan, no larger than 11 x 17 inches, which meets the requirements of Section 10.514 of the Zoning Ordinance of Madison Heights and the required seven hundred and fifty dollar fee (\$750.00) plus a site plan application.

This petition / application must be signed by both the Owner in Fee of the property and the Applicant prior to submittal. Applicant(s) and property owner(s) hereby consent to city staff, board and commission members, and contractors to access the property for purposes of evaluating the site for the requested action(s).

**FOR THE OWNER:**

Signature

Printed

Steve Gunn

Name

Date

3-27-24

**FOR THE APPLICANT IF NOT THE OWNER:**

Signature

Printed

Name

Date

**NOTARY:**

On this 27 day of March

Before me personally appeared

Steven Gunn to me known to be the

person who executed the forgoing instrument, and

acknowledged that he executed the same as his free act

and deed.

Notary's

Signature

Notary's

Printed Name

Jessica Prather

Notary public, State of Michigan,

County of

Macomb

My commission expires

3-14-26

Acting in the County of

Oakland

**NOTARY:**

On this \_\_\_\_\_ day of \_\_\_\_\_

Before me personally appeared

\_\_\_\_\_ to me known to be the

person who executed the forgoing instrument, and

acknowledged that he executed the same as his free act

and deed.

Notary's

Signature

Notary's

Printed Name

Notary public, State of Michigan,

County of \_\_\_\_\_

My commission expires \_\_\_\_\_

Acting in the County of \_\_\_\_\_

**OFFICE USE ONLY**

\$750.00 Fee Paid \_\_\_\_\_ Receipt Number \_\_\_\_\_ By \_\_\_\_\_ Date: \_\_\_\_\_

One Site Plan Attached no larger than 11 x 17 inches ☐ Yes ☐ No

Site Plan Application: \_\_\_\_\_ Date: \_\_\_\_\_

Copies to C.D.D. \_\_\_\_\_

Notices Mailed to Properties Within 500 Feet \_\_\_\_\_

Council Action \_\_\_\_\_

Meeting Date \_\_\_\_\_