



CITY OF WHITEHALL

APPLICATION FOR COMMERCIAL SITE PLAN REVIEW

Address of Subject Property:		
Applicant:		Business Name:
Street:	City State Zip	Phone:
Owner (if not applicant):		
Street:	City State Zip	Phone:
Relationship of Applicant to Owner:		
Description of Proposed Use:		
Zoning District:	Deed Restrictions:	

A site plan signed by a licensed surveyor, engineer or architect **must** accompany this application depicting all of the following:

- Property Dimensions/Street Right-of-Way lines
- Size, Shape, and Location of Existing and Proposed Structures
- Location and Layout of Parking and Driveways
- Proposed Grades and Drainage
- Landscape Plan
- Hazardous Substance Reporting Form

I do hereby affirm that the information provided is true and correct to the best of my knowledge.

Signature of Applicant

Date

Fee Due: **\$200.00** Paid on: _____ Received by: _____ Receipt # _____

A site plan approval, granted pursuant to Ordinance, shall be **valid for one year** from the date issued. If construction has not commenced within said one year, the site plan approval shall be deemed expired and no longer valid.

OFFICE USE ONLY

- APPROVED
- DENIED

COMMENTS/PROVISIONS: _____

ZONING ADMINISTRATOR

DATE OF ACTION

Return to: City of Whitehall, 405 E. Colby Street, Whitehall, MI 49461
WHITEHALL AREA WELLHEAD PROTECTION
HAZARDOUS SUBSTANCES REPORTING FORM FOR SITE PLAN REVIEW

This form must be completed and submitted with the site plan for all applications for commercial site plan review.

Name of Business: _____

Name of business owner(s): _____

Street and mailing address: _____

Telephone: _____

Fax: _____

Property Address: _____ Whitehall, MI 49461

I affirm that the above information is true and correct to the best of my knowledge.

Owner(s) signature and date: _____

Information compiled by: _____

WHITEHALL AREA WELLHEAD PROTECTION

Part I: Management of Hazardous Substances and Polluting Materials

1. Y N Will the proposed facility store, use or generate hazardous substances or polluting materials (including petroleum-based products) now or in the future?

If yes, please complete items 2 through 7 below.

2. Y N Will the hazardous substances or polluting materials be reused or recycled on-site?

3. Y N Will the hazardous substances or polluting materials be stored on-site?

If yes, identify the storage location on the site plan. Describe the size and type of secondary containment structure here or on an attached page.

4. Y N Will the new underground storage tanks be located less than 2,000 feet from drinking water wells serving two or more establishments or less than 300 feet from a single family drinking water well?

5. Y N Are existing underground storage tanks on-site less than 200 feet from a drinking water well serving more than a single household?

If the answers to questions 4 or 5 are yes, you may be in violation of the State of Michigan underground storage tanks regulations. For specific requirements, please contact the MDEQ, Underground Storage Tank Division. District Office Phone: 616-356-0500.

6. Y N Will the interior of the facility have general purpose floor drains? (general purpose floor drains may not be connected to a storm water drainage system, dry well or septic system.)

If yes, will the floor drain connect to: (circle one)

- a. sanitary sewer system
- b. on-site holding tank
- c. on-site system

*Note: The on-site system must be approved by the MDEQ, Contact MDEQ, Waste Management Division
District Office Phone: 616-356-0500*

7. Y N Will hazardous substances or polluting materials be stored, used or handled out-of-doors near storm drains which discharge to lakes, streams or wetlands?

If yes, describe the type of catch basin or spill containment facilities which will be used (use an attached sheet with diagram if appropriate.)

WHITEHALL AREA WELLHEAD PROTECTION

Part II: Types & Quantities of Hazardous Substances & Polluting Materials Used, Stored, or Generated On-Site

Please list the hazardous substances and polluting materials (including chemicals, hazardous materials, petroleum products, hazardous wastes and other polluting materials) which are expected to be used, stored or generated on-site. Quantities should reflect the maximum volumes on hand at any time. Attach additional pages if necessary to list all hazardous substances and polluting materials.

COMMON NAME	CHEMICAL NAME (COMPONENTS)	FORM	MAX. QUANTITY ON HAND AT ONE TIME	TYPE OF STORAGE CONTAINERS
	KEY: Liq = liquid P. Liq = pressurized liquid S = solids G = gas P.G. = pressurized gas			KEY: AGT = aboveground tank DM = drums UGT = underground tank CY = cylinder CM = metal cylinders CW = wooden or composition container TP = portable tank