GENOA TOWNSHIP PLAT APPLICATION

DATE:	
APPLICANT:	
ADDRESS:	
NAME OF PROPOSED SUBDIVISION:	
NUMBER OF LOTS:	
TYPE OF REVIEW:	
LOCATION:	
CURRENT ZONING:	
PROPERTY OWNER(S):	-
	-
I hereby certify that all information and data attached to and made part of this appli accurate to the best of my knowledge and belief.	cation are true and
PROPERTY OWNER/PROPRIETOR	

DATE:_____