

SUPERVISOR
Karen Varney
CLERK
Bonnie Hergenreder
TREASURER
Stefanie Bruce

TOWNSHIP OF WELLS
Tuscola County
2190 Frankford Rd
Caro, Michigan 48723
989-673-4481
www.wellstwp.org

TRUSTEE
Jason Koehler
Terrie Flikkie
ZONING
ADMINISTRATOR
Paul Strasz

Zoning and Escrow Policy

In an effort to prevent Wells Township taxpayers from bearing the cost for the Planning Commission or Zoning Board of Appeals to process zoning applications, the Township is authorized by State Statute to establish fees and policies for such applications. Wells Township has adopted the following Zoning and Escrow Policy at a regular meeting held on the 11th day of April 2024.

- 1) An application fee and escrow deposit shall accompany any application to the Planning Commission or the Board of Appeals under the Township Zoning Ordinance payable to the Township of Wells and in the amount set by township board resolution.
- 2) The application fee is designed to cover the cost of the review of the application, the preliminary costs of publishing and mailing any required legal notices and the per diem meeting costs of the board members for any necessary initial public hearing. The application fee is non-refundable even when an application or appeal is withdrawn by the applicant.
- 3) The escrow fee is designed to cover cost beyond the application fee such as, but not limited to:
 - a) Township Attorney fees and cost for review, research, consulting, drafting, or meeting attendance.
 - b) Planner fees and costs for review, report, and meeting attendance.
 - c) Engineer fees and costs for review, report and meeting attendance.
 - d) Consultants and/or professionals (traffic, environmental, storm water, or other professionals) fees and costs for review, reports and meeting attendance.
 - e) Cost of surveys
 - f) The cost of any additional public hearings.
- 4) Escrow fees and a signed Escrow Policy Affidavit form are required at the time of application. The Planning Commission or Board of Appeals and the Township Supervisor may waive this escrow policy for a particular application.
- 5) The Township Clerk shall keep account of all bills under each escrow account separately and shall maintain an escrow account record. All invoices shall be forwarded to the Township Clerk for payment and the Clerk shall draw from the Applicant's escrow account and pay said amount to the appropriate person, firm or consultant or the Township for escrow activities carried out by the Township.

6) The Township shall provide a written accounting to each Applicant monthly. The Township shall notify the Applicant if its escrow account balance falls below 20% of the initial escrow deposit. Once notified, the Applicant shall redeposit into the account AT LEAST the full amount of the escrow deposit in order to continue the review of the application. No further action will be taken on an application until the escrow account is re-established.

7) Should the Applicant withdraw its application or fail to complete all actions necessary for the Township to issue a final permit or final zoning approval, the Township may seek reimbursement for its costs incurred in responding to the application. (civil infraction)

8) Any excess escrow balance upon completion of an application will be refunded to the Applicant with no interest accumulating on those funds. The Township Board shall authorize disbursement of escrow funds as part of their normal monthly bill approval process.

Escrow Policy Affidavit

I, _____ have read the Wells Township Zoning Fees and Escrow Policy and agree to abide by the same. I understand that the payment of the prescribed application and escrow fees is intended to cover the Township's cost associated with the processing and/or review of my zoning application and should not in any manner be construed as suggesting and particular outcome for the application. I agree that I shall be obligated to pay the fees prescribed under the policy regardless of whether my application is approved, denied, modified, or withdrawn.

Applicant Name: _____ Signature: _____

Property Owner Name: _____ Signature: _____

Person/Company responsible for Escrow payment:

Name: _____

Address: _____

Email: _____

Phone: _____

I certify that the above policy was approved at a regular Township Board meeting held on the 11th day of April, 2024.

Bonnie Hergenreder, Clerk

Date