

LAKE TOWNSHIP ZONING BOARD OF APPEALS

CASE # _____

5153 SCENIC HIGHWAY (22)

DATE RECEIVED: _____

HONOR, MI 49640

HEARING DATE: _____

Phone 231-325-5202

FEE: _____ RECEIPT # _____

Fax 231-325-4177

ACTION: _____

APPLICATION -- ZONING BOARD OF APPEALS

OWNER(s) NAME: _____	TELEPHONE #: _____
ADDRESS: _____	CELL: _____
CITY, STATE ZIP _____	FAX: _____
	E-MAIL _____

APPLICANT NAME(if different than owner): _____	TELEPHONE #: _____
ADDRESS: _____	CELL: _____
CITY, STATE ZIP _____	FAX: _____
	E-MAIL _____

PROPERTY INFORMATION

ADDRESS: _____	PARCEL # 10- _____
	ZONING DISTRICT: _____
LOT SIZE: _____	
LEGAL DESCRIPTION: _____	

PRESENT USE: _____ PROPOSED USE: _____

PLEASE NOTE: All questions must be answered completely. If additional space is needed, number and attach additional sheets. The total number of attached sheets are _____.

I. ACTION REQUESTED:

I/We, the undersigned, request a hearing before the Lake Twp. Zoning Board of Appeals for the purpose indicated below: (Circle. More than one may be circled)

Ordinance or Map Interpretation Dimensional Variance Appeal from Administrative Decision Other

II. PROPERTY HISTORY

A. List all deed restrictions (attach additional sheets if necessary):

B. Names and Addresses of all other persons, firms, or corporations having a legal or equitable interest in the land:

- C. This area is unplatted, platted will be platted. If platted, name of plat _____.
- D. Attach a site plan if such is required by the Lake Township Zoning Ordinance.
- E. A previous appeal has has not (choose one) been made with respect to these premises in the last _____ Years. If a previous appeal, rezoning, or special use permit application was made, state the date, nature of action requested, and the decision:

Date: _____ Action Requested: _____

Decision: Approved Denied Reason: _____

III DETAILED REQUEST AND JUSTIFICATION

A. Interpretation of Zoning Ordinance or Map

1. The applicant respectfully requests the Board of Appeals to make an interpretation of :

____ (a) The location of district boundaries of the Lake Twp. map as applied to the property described in this application.

____ (b) The provisions of Article ____ Section ____ Of the Lake Twp Zoning Ordinance.

____ (c) Other, Specify: _____

2. Please describe in detail the nature of the problem to be interpreted and the reason for the request _____
 _____ Attach additional sheets if necessary.

B. Variance from the Requirements of the Zoning Ordinance.

1. Indicated below are the Ordinance requirement(s) which are the subject of the variance request:

- | | | | |
|---|---|---|------------------------------------|
| <input type="checkbox"/> Lot Coverage | <input type="checkbox"/> Front Setback | <input type="checkbox"/> Rear Setback | <input type="checkbox"/> Signs |
| <input type="checkbox"/> Area Requirements | <input type="checkbox"/> Side Setback _____ | <input type="checkbox"/> Side Setback _____ | <input type="checkbox"/> Placement |
| <input type="checkbox"/> Off street Parking | <input type="checkbox"/> Height | | <input type="checkbox"/> Other |

Explain: _____

2. State exactly what is intended to be done on, or with the property which necessitates a variance from the Zoning Ordinance: _____

3. Describe the characteristics of your property which require the granting of a variance (include dimensional information).

- | | | | | |
|-------------------------------------|------------------------------------|--------------------------------------|--------------------------------|------------------------------------|
| <input type="checkbox"/> Too Narrow | <input type="checkbox"/> Too Small | <input type="checkbox"/> Too Shallow | <input type="checkbox"/> Slope | <input type="checkbox"/> Elevation |
| <input type="checkbox"/> Shape | <input type="checkbox"/> Soil | <input type="checkbox"/> Subsurface | <input type="checkbox"/> Other | |

Explain: _____

C. A dimensional, non-use variance from requirements of the Zoning Ordinance may be granted if Applicant can prove a "practical difficulty" exists, by supplying the following information:

1. Is the problem due to unique circumstance(s) on your property? Yes No

- Explain: _____
2. Was the problem created by you? Yes No
Explain: _____
 3. Is the use permitted in this Zoning District? Yes No
 4. Is the request only to increase sale value? Yes No
Explain _____
 5. Is the problem so general in the zoning district that the Zoning Ordinance should be amended?
 Yes No If yes, Explain _____
 6. Will granting the variance cause any adverse effect on property values in the vicinity?
 Yes No Explain: _____
 7. Is the request the minimum possible variance that will allow for a reasonable use of the land or structure?
 Yes No Explain: _____
 8. Were other variances or non-conformities in the vicinity considered as a basis for this request?
 Yes No Explain _____
 9. Will any services such as utilities, snow plowing, health, etc., be affected by this request? Yes
 No Explain: _____
 10. Is there any other information you wish to include herein or attach hereto which will aid you in your request?

If additional space is needed to answer any question, attach pages and continue answer noting question number.

Please attach a site plan including the following information: North Arrow, Front, Rear and side property lines and their dimensions, Existing structures and proposed structures and their locations relative to each other and the lot lines, Location of existing or proposed septic systems and wells, Location of shore line if property is within 500' of a lake, river or stream, Location of Wetlands, Location of steep slopes/ravines, Dimension of each structure, Road or Street and driveway.

Please attach copies of any permits or documentation required from any other affected agencies.

The undersigned certifies that all the information contained herein or attached hereto is true to the best of their knowledge; acknowledges that the granting of the variance does not relieve the applicant from the responsibility of Compliance with all other provisions of the Zoning Ordinance and all other applicable Federal, State, and Local laws; and, that the variance must be implemented within one year or the permit becomes null and void.

Date: _____

Applicant(s) Signature _____

(Print or Type Name and Title)

(Print or Type Name and Title)