Locke Township

Ingham County, Michigan

3805 Bell Oak Road, Williamston, MI, 48895   (517) 468-3405   Fax (517) 468-0105

APPLICATION to the
ZONING BOARD of APPEALS (ZBA)

(All references to "Section" and "Article" refer to the Locke Township Zoning Ordinance)

Important Notice to Applicants: *This application must be completed in full and 7 copies submitted to the Zoning Administrator. All questions must be answered completely. If additional space is needed, number and attach additional sheets.*

1) APPLICANT:

Name	Street Address	City / State / Zip Code	Telephone #

2) Application For: ☐ Administrative Review (Sec. 6.05)   ☐ Interpretation (Sec. 6.06)   ☐ Variance (Sec. 6.07)

ADMINISTRATIVE REVIEW

This part is to be completed only for appeals for an administrative review. See Sec. 6.05.

3) **The applicant requests the reversal or modification of the decision of the:**
   ☐ **Zoning Administrator   or   ☐ Planning Commission (check as applicable),**
   made on (date) _____ **regarding Application No.** _____ .

4) **Reversal or modification requested:** _____
   _____
   _____
   _____

5) **Reasoning why reversal or modification is appropriate:** _____
   _____
   _____
   _____
   _____

INTERPRETATION of ZONING ORDINANCE TEXT or MAP

This part is to be completed for ordinance interpretation requests only. See Sec. 6.06.

6) **The applicant requests the ZBA make an interpretation of:**
   _____ **a.** The location of district boundaries on the Zoning Map as applied to the property described as Tax Parcel # _____ , or by the ☐ attached legal description.
   _____ **b.** The provisions of Section _____ of the Ordinance.
   _____ **c.** Other, specify: _____

7) **Please describe in detail the conditions necessitating an interpretation and the reason for the request.**
   _____
   _____
   _____
   _____
   _____

FOR TOWNSHIP USE ONLY	
Application Number:	**Tax Parcel Number:**
Date Received:	**Date of Final Action:** – –
Fee Paid **Date** **Receipt #** 1) 2)	**Action:**
Notes:	

REQUEST for VARIANCE

This part is to be completed for variance requests only. See Sec. 6.07.

8) **State specifically the variance(s) being requested (such as a 5' reduction on side yard setback, 20% reduction in parking spaces, etc.)**

_____

_____

_____

_____

9) **Describe the peculiar or unusual characteristics of the property that requires the granting of a variance.**

_____ too narrow	_____ elevation	_____ soil
_____ too small	_____ slope	_____ subsurface
_____ too shallow	_____ shape	_____ other (please specify):

_____

10) **Describe what is to be done with the property that necessitates a variance.**

_____

_____

11) **Legal description of subject property:**

_____

_____

_____

12) **Address of Property:** _____

13) **This property is:**   <u>unplatted</u> or <u>platted</u> or <u>part of a condominium subdivision</u> (circle appropriate answer)

Name of platted or condominium subdivision: _____

14) **Present use of the property is:** _____

15) **Existing zoning classification of the property is:** _____

16) **Are there deed restrictions on the property:**   _____ **No**   _____ **Yes**

17) **SUPPORTING DOCUMENTS:** Seven copies of the following materials shall be submitted as part of an application for a variance in addition to any others noted in this application.

A. Drawings: A plan drawn at a readable scale, clearly showing, but not limited to, property lines, lot shape and dimensions, proposed and existing building locations and dimensions, parking and yard areas, and features for which a variance is being requested.

B. Proof of Property Ownership: Proof of ownership of the property subject to the application, such as a property deed, or other evidence of interest in the property.

C. Deed Restrictions: Copy of all existing deed restrictions impacting the property.

18) JUSTIFICATION: Section 6.07 identifies the basis for the review of variance requests. The applicant is strongly encouraged (not required) to submit written documentation addressing the extent to which the variance request complies with the review standards of section 6.07.

19) AFFIDAVIT: I (we), the undersigned, acknowledge that if a variance is granted, or other decisions favorable to the undersigned are rendered, the said decision does not relieve me (us) from compliance with all other provisions of the Locke Township Zoning Ordinance.   I(we), the undersigned, affirm that the answers, statements, and information contained herein are in all respects true and correct to the best of my (our) knowledge and belief.

_____

Applicant's Signature(s)	Date	Property Owner's(s) Signature(s)	Date
		(if different than applicant)	