

APPLICATION FOR ZONING VARIANCE CHANDLER TOWNSHIP

Douglas Waldo, Zoning Administrator
00501 Hughes Road, Boyne Falls, MI 49713 (231) 549-2295

Applicant's Information

Name: _____ Phone: _____

Address: _____

Owner's Information (if different from the applicant's)

Name: _____ Phone: _____

Address: _____

Property Description

Address: _____ Nearest Intersection: _____

Property Tax Code #: _____ Subdivision & Lot #: _____

Zoned District: _____

Variance Request

Please describe the reason(s) for requesting zoning variance: _____

Property Drawing

Please attach an accurate drawing of the site. The drawing should include all of the following:

- Property boundaries with property line dimensions.
- Existing and proposed building with dimensions (including height).
- Distance from the lot lines of each existing or proposed building(s).
- Unusual physical features of the site or building.
- Abutting streets.
- Approximate well, septic tanks, and field locations.
- Other structures and uses within 100 feet of the property.

Applicant must supply maps, drawings, pictures, graphs, etc. in order to inform the Board of the building or activity type, and how it will look when accomplished. This information must be supplied at least 3 weeks prior to the hearing date.

Impact of Request on Applicant

What specific problem(s) would be created to you as a petitioner if your request is not granted? What are the unique conditions and/or circumstances?

Impact of Request on Other Properties

If your request is granted, what impact will it have on the area? Does your request represent a change in the types of uses permitted? Will it hamper access by emergency vehicles or personnel? Will it restrict light, air, or access to adjacent properties? Will it in any other way create problems or concerns to other properties in the area?

I understand that if the requested variance is granted, I am in no way relieved from all other applicable requirements of the Chandler Township Zoning Ordinance. It is also understood that any approval by the Zoning Board of Appeals involving site improvements, use, and/or construction does not relieve the applicant from obtaining other applicable authorizations. (For example: site plan, building, health department, soil erosion, and engineering approval, etc.)

I authorize Chandler Township [staff, appointed board member(s), trustee(s), or committee member(s)] to enter upon the subject property for purposes of making inspections related to the project or request identified in this application. I certify all the above information in this Zoning Variance Application is accurate to my fullest knowledge.

Owner's Signature

Date

Petitioner's Signature (if different from the owner)

Date

OFFICE USE ONLY

Date Received

Assigned Case #

Zoning Board of Appeals Decision and Order: _____

Approval Signature

Hearing Date