

ZONING VARIANCE APPLICATION



CHOCOLAY TOWNSHIP

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Marquette, MI 49855
Phone: 906-249-1448 Fax: 906-249-1313
chocolay.gov

APPLICATION NUMBER

ZV-____-____

APPLICANT IDENTIFICATION

Date of application _____ Project address _____

PROPERTY OWNER

Name _____

Address _____

City / State / Zip _____

Contact number _____

E-mail _____

APPLICANT (if different from property owner)

Name _____

Address _____

City / State / Zip _____

Contact number _____

E-mail _____

If the applicant is not the property owner, the property owner grants permission for the applicant to act on the owner's behalf for this project.

Owner signature _____ Date _____

Applications must be submitted to the Planning Director 30 calendar days prior to the next scheduled Township Zoning Board of Appeals meeting.

VARIANCE INFORMATION

Current land use _____ Property size _____

Legal description

attached

Variance request detail

VARIANCE REQUEST CRITERIA

The Zoning Board of Appeals uses four standards when deciding if a variance should be granted. Please respond as best as possible to the statements below.

Note Project costs or aesthetics are rarely viewed as reasons to grant a variance.

ZBA Standard Number 1

Whether strict compliance with the requirements for area, setbacks, frontage, height, bulk or density would unreasonably prevent the owner from using the property for a permitted use or would render conformity with such requirements as unnecessarily burdensome.

Explain why it would be unreasonable to be compelled to comply with the requirements or what burden(s) would be created if there was mandatory compliance with the requirements as provided in the Township *Zoning Ordinance*.

ZBA Standard Number 2

Whether granting the variance requested or a lesser variance where feasible would do substantial justice to the applicant as well as to the property owners in the area without altering the essential character of the neighborhood.

If the variance or a modified variance is granted, explain why it would not adversely affect your neighbors and / or the character of the neighborhood.

ZBA Standard Number 3

Whether the plight of the landowner is due to unique circumstances of the property.

Explain any unusual circumstances that are relevant to the property that do not exist on other similar Township properties, and how the circumstances prevent compliance with the requirements of the Township *Zoning Ordinance*.

VARIANCE REQUEST CRITERIA (continued)

ZBA Standard Number 4

Whether the problem is self-created.

Explain whether or not some action or activity that was taken by the property owner or previous owners resulted in the creation of a situation that now requires a variance from the zoning ordinance.

ATTACHMENTS TO THE APPLICATION

Additional information (such as a certified survey) can be included with your application if you believe it would support your presentation and reasons for a variance. Please check the item(s) you have included as attachments.

- Brochures of marketing information for any pertinent manufactured items
- Copies of permits that have been granted
- Deed restrictions (if any)
- Photos
- Proof of property ownership(s) and legal description(s)
- Relevant surveys and maps
- Site plan as proposed

APPLICATION CONDITIONS

1. I am, or under the control of, the owner of the property for which this application is being submitted.
2. I certify the information provided in this application is true and accurate to the best of my knowledge.
3. I certify the requested zoning variance would not violate any deed restrictions attached to the property identified in the request.
4. I understand the fee is non-refundable and is to cover the costs associated with processing this application, and that it does not assure approval of the application.
5. I acknowledge that this application is not considered filed and complete until all of the required information has been submitted and all required fees have been paid in full. Once my application is deemed complete, I will be assigned a date for a public hearing before the Zoning Board of Appeals that may not be necessarily be the next scheduled meeting due to notification requirements.
6. I understand that a public hearing is required to be held by the Zoning Board of Appeals, and I further understand that the Zoning Board of Appeals may table action to a later meeting if the Board determines that more information is necessary in order to take specific action on the proposed variance.
7. I understand that the final decision in this process is made by the Zoning Board of Appeals and they may approve, approve with conditions or deny the request.

Owner / Agent signature _____ **Date** _____

Name (print) _____

TOWNSHIP OFFICE

Zoning Administrator Denial

Original request

Zoning Compliance Permit Permit number _____

Other Other description _____

Denial date _____

Denial reason

TOWNSHIP OFFICE

Parcel ID 52-02- _____ - _____ - _____ Zoning District _____

Application Charge **\$300.00**

Date paid _____ Receipt number _____

Information Received

- Brochures of marketing information for any pertinent manufactured items
- Copies of permits that have been granted
- Deed restrictions (if any)
- Photos
- Proof of property ownership(s) and legal description(s)
- Relevant surveys and maps
- Site plan as proposed

Public Hearing Notifications

Minimum of 30 calendar days prior to the Zoning Board of Appeals meeting

Scheduled Zoning Board of Appeals meeting date _____

Date public hearing notice to be published _____

Date notices to be mailed to the affected public _____

Date notice to be posted on the Township web site _____

Zoning Administrator signature _____ **Date** _____