

HOLLY TOWNSHIP

102 Civic Drive • Holly, Michigan 48442 • Phone (248) 634-9331 • Fax (248) 634-5482

APPLICATION FOR ZONING BOARD OF APPEALS

Instructions to Applicant:

Answer each question completely. Read the additional instructions provided on page 2 of this application. Incomplete submittals will not be processed.

For Township Use Only:

Date Received: _____
File No.: _____
Administrative Fee Paid: _____
Escrow Fee Paid: _____

1) Applicant:

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (Home) _____ (Office) _____ (Fax) _____
Interest: _____

2) All Parties of Interest (Title Holder, Contract Purchaser, Partners):

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (Home) _____ (Office) _____ (Fax) _____
Interest: _____

(If the applicant/petitioner is not the owner of record, a notarized letter of authority or Power of Attorney must be included as part of this application)

3) General Property Information and Description:

General Location: _____
Acreage: _____
Sidwell (Property ID) Number: _____
Legal Description: _____
(Attach metes and bounds description where applicable)

Site Plan Attached: Yes _____ No _____

4) Current Zoning

Classification: _____

5) Action Requested: (Check not more than one below)

(a) Ordinance or Map Interpretation: Yes _____ No _____
(If "Yes", proceed to Question 6)

(b) Variance: Yes _____ No _____
(If "Yes", proceed to Question 7)

(a) Appeal of Administrative Decisions: Yes _____ No _____
(If "Yes", proceed to Question 8)

6) Interpretation: The appellant requests that an interpretation be made of the following Zoning Ordinance provisions:

(a) Zoning Ordinance: Article _____ Section _____

(b) Zoning Map Boundary: (please describe) _____

(c) An interpretation is requested because: _____

7) Variance: The appellant requests a variance from the following Township Zoning Ordinance provisions:

(a) Zoning Ordinance Article _____ Section _____

(b) Describe the need for variance: _____

(b) Describe why the appeal is requested: _____

9) Signature:

I, the undersigned, state that the foregoing answers herein contained and the information herewith submitted are in all respects true and correct to the best of my knowledge and belief. I also understand that I must appear at the meeting and/or have someone to represent my case.

Signature of Applicant _____ Date

Instructions to Applicant:

- 1) Zoning Board of Appeals meetings are held on the second Monday of the month.
- 2) For a ZBA Application to be considered, the application, plot plan and legal description must be submitted at least (21) days before the scheduled Zoning Board of Appeals Meeting.
- 3) At a minimum, the plot plan must be drawn to scale indicating:
 - a) Lot dimensions.
 - b) Location and dimensions of existing and proposed structures.
 - c) Existing set backs.
 - d) Location of well and septic system.
 - e) Proximity of existing and proposed structures from neighboring structures.