ZONING VARIANCE APPLICATION

Date Received

Fee: \$200

Case #

LITTLE TRAVERSE TOWNSHIP

8288 Pleasantview Road, Harbor Springs, MI 49740 231-526-0351

1. (Owner: Name:
	Address:
	Telephone: (daytime) (evening)
A	Applicant if other than owner:
A	Address
٦	Telephone
2.	Describe Variance Request:
3.	Legal Description of Property (attach separate sheet if necessary):
	Property Tax Code # Zoned District:
	or Subdivision and Lot #
	Nearest Intersection:
4.	Address of Property:
5 .	
<i>.</i>	Submit <u>FIVE</u> copies of the Completed application, application fee of \$200, and <u>FIVE</u> copies of an Accurate Drawing of the Site Showing:
	a) Property Boundaries, with property line dimensions
	 b) Existing and Proposed Building, with dimensions (indicate height also) c) The Distance from the Lot Lines of Each Existing or Proposed Building
	d) Unusual Physical Features of the Site or Building.
	e) Abutting Streets
	 f) Approximate Well and Septic Tank, and Field Location. g) Other structures and uses within 100 feet of the property.
Appli	icant must supply maps, drawing, pictures, graphs, etc., in order to inform the board
f th	ne type of building or activity, and how it will look when accomplished. This
ntor	mation must be supplied at least three weeks prior to the date of hearing.
. Ui	nique or exceptional circumstances:

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7. Is variance necessary for preservation and enjoyment of a substantial property right possessed by others in the vicinity? Will strict compliance prevent the owner from using the property for the permitted purpose? Please explain.	
8. Will granting the variance be materially detrimental to public welfare or materially injurious to property in the district? Will granting the variance be fair to the applicant, or would a lesser variance work as well? Please explain.	
9. Will the variance adversely affect the purposes or objectives of the Zoning Ordinance? Will it be fair to neighboring properties? Please explain.	
10. Has the need for the variance been created by some action of the applicant? Explain	
I understand that if the requested variance is granted, I am in no way relieved from all other applicable requirements of the Little Traverse Township Zoning Ordinance. It is also understood that any approval by the ZBA 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 Little Traverse Township (staff, appointed board, Trustees, or committee members) to enter upon the subject property for purposes of making inspections related to the project or request identified in this application.	
I certify that all the above information in this Zoning Variance Application is accurate to my fullest knowledge.	
Owner's Signature: Date:	
Petitioner's Signature If different than owner: Date:	

Applicant or representative <u>must</u> attend the hearing in order for the case to be heard