

**Port Sheldon Township
16201 Port Sheldon Road
West Olive MI 49460
616-399-6121 Fax 616-399-7173**

**Zoning Board of Appeals Application
Filing fee \$350.00 Date Filed_____**

Application is hereby made to the Zoning Board of Appeals for one or more of the following, pursuant to provisions of the Zoning Ordinance:

If a variance is being applied for, it is contrary to Section(s) _____ of the Zoning Ordinance.

If not a variance, application is made pursuant to Section(s) _____ of the Zoning Ordinance.

Name of Applicant: _____ Phone # _____

Address of Applicant: _____

Applicant's interest in property _____

Name of property owner _____

Address of property owner _____

Parcel Number of property in question _____

Address of property in question _____

Zone District of property in question _____

Present use of property/structure _____

Proposed use of property/structure _____

Size of Existing and/or proposed structure _____

Description of existing and/or proposed structure _____

Describe the nature of your request and/or appeal _____

If there has been a previous request and/or appeal involving the existing structure and/or premises, state the date of filing, character of request or appeal and disposition of same _____

What are the practical difficulties or unnecessary hardships that would prevent carrying out the strict letter of the ordinance: (Reference – Sec) _____

Since a variance in the provisions or requirements of the ordinance CANNOT BE AUTHORIZED BY THE BOARD UNLESS it finds from reasonable evidence that ALL of the following facts and conditions exist, IT IS IMPERATIVE THAT YOU GIVE INFORMATION TO SHOW THAT THE FOLLOWING FACTS AND CONDITONS DO EXIST. (Reference Sec.)

A. That special conditions and circumstances exist which are peculiar to the land, structure or building involved and which are not applicable to other lands, structures or buildings in the same zoning district. _____

B. That literal interpretation of the provisions of this Ordinance would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district under the terms of this Ordinance. _____

C. That the special conditions and circumstances do not result from the actions of the applicant *or owner*.

D. That granting the requested variance will not confer on the applicant any special privilege that is denied by this Ordinance to other lands, structures or buildings in the same zoning district.

Use additional sheet if necessary.

Signature of applicant/agent/owner (circle one)

Notes: The filing fee must accompany this application and a site plan and/or building plan.
Please read the instructions for filing and make sure your application is complete with all questions answered.