

PORT SHELDON TOWNSHIP
16201 Port Sheldon Road West Olive MI 49460
616-399-6121 Fax 616-399-7173

PRIVATE ROAD VARIANCE APPLICATION

Application is hereby made to the Port Sheldon Township Board for a Variance from the Private Road Ordinance #41.

Name of Applicant _____ Phone _____

Address of Applicant _____

Parcel Number(s) of subject property _____

Zone District of subject property _____

Applicant's interest in property _____

Owners Name/Address _____

Describe the nature of your appeal _____

If there has been a previous request and/or appeal involving this property, state the date of filing, nature of request and disposition of same _____

What are the practical difficulties or unnecessary hardships that would prevent carrying out the strict letter of the ordinance _____

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 conditions do exist

a. That special conditions and circumstances exist which are peculiar to the land, which are not applicable to other lands in the same zoning district _____

b. That literal interpretations of the provision 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/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 in the same zoning district _____

Attach additional sheet if necessary

Signature of agent/owner/applicant (circle one) and date _____

A filing fee of \$200.00 and a site plan of the proposed road must accompany this application.