ZONING VARIANCE APPLICATION

ALMENA TOWNSHIP

27625 CR 375

PAW PAW, MI 49079

269-668-6910 FAX 269-668-6913

www.almenatownship.org

A variance allows people to deviate from a requirement of the zoning ordinance. By asking for a variance, property owners must prove that strict enforcement of the law would cause practical difficulties for the property owner due to circumstances unique to the property.

The ZBA meets when necessary on the 3rd Monday of the month at the Almena Township Hall. It is to the benefit of the applicant to be present at the meeting.

Application and the proper fee must be submitted four (4) weeks prior to the scheduled ZBA meeting for review. If the information and/or drawing submitted are deemed inadequate, additional information will have to be received before the ZBA hearing is scheduled or the variance request is put on the agenda. A drawing prepared by a licensed surveyor or engineer may be requested to provide accurate information.

Additions to the application will not be accepted at the hearing. The original applications and minutes of the ZBA hearings will be on file at the Township.

PROCEDURE

- 1. Pick up the application at the Township Hall (M, W, F 9am-4 pm) or at our website www.almenatownship.org
- 2. Pay application fee of \$350 to Almena Township. (Non-Refundable)
- 3. Use this checklist when making a scale drawing/map of the property. *Accurate* drawings are very important in helping the ZBA to make decisions.

Use a scale of not less than one (1) inch for every 20 feet of property; please use graph paper if this will help you in keeping the scale accurate throughout the drawing.

Draw ALL roads and property lines

Draw *ALL* existing structures with dimensions and distances between them (including distances to property lines and the center of the roadway)

Draw and Label all proposed changes in the diagram

Include locations of well, septic system, and drain field

Draw ALL lakes, streams, wetlands or other natural features on the property.

If available, please include any surveys, photos or site plans to help clarify your request.

Revision: 07/2016

that the Zoning Board of Appeals must refer to in granting variances.	
NAME:	
ADDRESS:	
PHONE: FAX:	
Name and address of any other person, form or corporation having a legal or equiproperty:	itable interest in the
I (we) petition the Township of Almena for a variance on the below described pro	
Parcel (Tax) #:	
Legal Description (Use attachments if necessary):	
Requirement: Ordinance Section No	
Proposed Requested Variance:	
Reason for Requested Variance:	

4. Please see the Almena Township Zoning ordinance, Article XXVII, Section 27.07(g) for considerations

Please attach to this application a scale drawing/map of the property. 1) Use a scale of not less than one (1) inch for every 20 feet of property. 2) Draw all roads and property lines. 3) Draw all existing structures with dimensions and distances between them (include distance to property lines and the center of the roadway) 4) Label all proposed changes in the drawing. 5) Include locations of well, septic and drain field. 6) Draw in lakes, streams, wetlands and natural features on the property. 7) If available include any surveys, photos or site plans to help clarify your request.

IF THE TITLEHOLDER OF THE PROPERTY APPLIES ON HIS/HER OWN BEHALF, HE/SHE SHALL SIGN IN THE LEFT SIGNATURE COLUMN BELOW.

IF THE TITLEHOLDER OF THE PROPERTY CHOOSES TO APPOINT A PROJECT AGENT TO ACT ON HIS/HER BEHALF, THE TITLEHOLDER SHALL SIGN IN THE RIGHT SIGNATURE COLUMN BELOW, AND THE APPOINTED PROJECT AGENT SHALL SIGN IN THE LEFT SIGNATURE COLUMN BELOW.

THIS AFFIDAVIT IS TO BE SIGNED BY THE TITLEHOLDER OF THE PROPERTY OR BY THE TITLEHOLDER'S APPOINTED PROJECT AGENT.

I hereby certify that the information given hereby is correct and true. I further certify that all information and data furnished in connection with this application or processing thereof is true and correct. I acknowledge that I am solely responsible for any and all errors and omissions.

THIS AFFIDAVIT IS TO BE SIGNED BY THE TITLEHOLDER OF THE PROPERTY, IF APPOINTING A PROJECT AGENT TO REPRESENT HIM/HER.

I hereby certify that I have appointed the above Project Agent to act on my behalf and authorize him to submit this application for me and to secure the permit. I further certify that all information and data furnished in connection with this application or processing thereof is true and correct. I acknowledge that I am solely responsible for any and all errors and omissions.

STATE OF MICHIGAN	STATE OF MICHIGAN	
COUNTY OF VAN BUREN	COUNTY OF VAN BUREN	
Titleholder/Project Agent Signature	Titleholder/Project Agent Signature	
Titleholder/Project Agency Printed Name	Titleholder/Project Agency Printed Name	
Subscribed and Sworn to me this	Subscribed and Sworn to me this	
day of	day of	
Commission Expires,	Commission Expires/,	
Township Clerk or Notary Public	Township Clerk or Notary Public	

Revision: 07/2016