

# CHIKAMING TOWNSHIP

13535 Red Arrow Hwy., PO Box 40, Harbert, MI 49115 (269)469-1676 phone (269)469-4416 fax Email: buildingdept@chikamingtownship.org

## PETITION FOR AMENDMENT FOR RE-ZONING

|                                  |            |       |            |
|----------------------------------|------------|-------|------------|
| Name of Applicant                | Home Phone |       | Cell Phone |
| Property Owner's MAILING Address | City       | State | Zip Code   |
| Email:                           |            |       |            |
| Property Code No.<br>11-07-      |            |       |            |

It is hereby requested that the Chikaming Township Planning Commission and the Chikaming Township Board of Trustees approve this request to re-zone parcel ID 11-07-\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ from a classification of \_\_\_\_\_ to a classification of \_\_\_\_\_.

### Requirements:

**A** Attach a site plan or a survey containing all of the following information:

- (1) Applicant's name, address, and telephone number.
- (2) Scale, north point, and dates of submittal and revisions.
- (3) Zoning classification of petitioner's parcel and all abutting parcels.
- (4) Existing lot lines, building lines, structures, parking areas, driveways, and other improvements on the site and within fifty (50) feet of the site.
- (5) Proposed lot lines and lot dimensions, and general layout of proposed structures, parking areas, driveways, and other improvements on the site.
- (6) Dimensions, centerlines, and right-of-way widths of all abutting streets and alleys, both public and private.
- (7) General location of existing drainage courses, floodplains, lakes and streams, and woodlots.
- (8) All existing and proposed easements.
- (9) Location of sanitary sewer or septic systems, existing and proposed.
- (10) Location and size of water main, well sites, and building services, existing and proposed.

**B.** Proof of fee ownership of the identified parcel.

Return **fifteen (15) copies** of all documents accompanied by a non-refundable fee of **\$1,000.00** to the Building Department office at Chikaming Township Hall. **Make check payable to Chikaming Township**

### V. PROCESS

You will be scheduled for the first Planning Commission meeting after approval of your application by the Zoning Administrator. The Planning Commission will question you about your proposal and review the application for completeness. If the application is deemed complete, the Planning Commission will then set a date for a public hearing, generally about thirty (30) days later. After the public hearing, the recommendation of the Planning Commission is then forwarded to the Board of Trustees for their action. The Township Board shall approve, approve with conditions or disapprove the request for an amendment to re-zone. ***This process may take up to ninety (90) days depending on dates for the meetings.***

P:\Building and Zoning\Revised Documents\Application for amendment to re-zone

**VI. AFFIDAVIT**

The undersigned affirms that I/we am/are the \_\_\_\_\_ (specify: owner, lessee or other type of interest) involved in this application; and that the answers and statements herein contained and the information herewith submitted are in all respects true and correct to the best of my/our knowledge and belief.

I hereby give Chikaming Township authorized personnel permission to enter upon this property, as necessary, in considering this application.

Applicant Signature

Date

\_\_\_\_\_

**For Office Use Only**

|                             |                          |                |
|-----------------------------|--------------------------|----------------|
| Case Number                 | Date and Fee Received    | Receipt Number |
| Planning Commission Action  | Planning Commission Date |                |
| Township Board Action       | Township Board Date      |                |
| Property Code No.<br>11-07- | Expiration Date          |                |

**Authorization for Agency**

I, \_\_\_\_\_ authorize \_\_\_\_\_

To act as my agent in reference to my application for an amendment to re-zone

parcel ID 11-07-\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ from a classification of \_\_\_\_\_ to a classification of \_\_\_\_\_.

This authorization terminates on \_\_\_\_\_ -

Signature of owner,

\_\_\_\_\_

Date \_\_\_\_\_