



# CITY OF CASEVILLE

6767 MAIN STREET

P.O. BOX 1049

CASEVILLE, MICHIGAN 48725-1049

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www.caseville-gov.com

## ZONING VARIANCE PETITION

FILING FEE: \$300.00

Print or type

DATE: \_\_\_\_\_ PROPERTY ID#: 3253- \_\_\_\_ - \_\_\_\_ - \_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE: \_\_\_\_\_

\_\_\_\_\_

OWNER'S NAME(S): \_\_\_\_\_

\_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

\_\_\_\_\_

### OFFICE USE ONLY

Application: # \_\_\_\_\_

Filing Fee: \$ \_\_\_\_\_ Ck# \_\_\_\_\_

Date Rec'd: \_\_\_\_\_

Hearing Date: \_\_\_\_\_

Pub. Dates: \_\_\_\_\_

Z.B.O.A. Action: \_\_\_\_\_

Council Action: \_\_\_\_\_

Date: \_\_\_\_\_

Stipulations: \_\_\_\_\_

### REQUEST FOR CHANGE OF ZONING

CURRENT ZONING DISTRICT \_\_\_\_\_ TO PROPOSED: \_\_\_\_\_

COMMON PROPERTY ADDRESS OR LOCATION: \_\_\_\_\_

LEGAL DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

LIST ALL DEED RESTRICTIONS AND EASEMENTS: \_\_\_\_\_

\_\_\_\_\_

PROPERTY DIMENSIONS: \_\_\_\_\_ AREA: \_\_\_\_\_

REASON FOR REQUEST AND PROPOSED USE: \_\_\_\_\_

\_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*OWNER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*If Zoning Variance affects multiple property owners, all must sign. Use additional forms if necessary.

**IMPORTANT NOTICE:** By signing this application, the applicant/owner agrees to fully reimburse the City for actual cost of processing this application. Cost exceeding the \$300.00 Filing Fee will be billed to the applicant/owner. FINAL APPROVAL OF THIS REQUEST WILL BE CONTINGENT UPON FULL REIMBURSEMENT.