Fremont Township Application For Variance

Please **Print** Answers to the Following Questions:

| Date of Application: | |
|---|---|
| Name of Applicant: | |
| Applicant's Address: | |
| Home Phone #: | Cell Phone #: |
| Name of Current Owner of Proposed | Site: |
| Owner's Address: | |
| Owner's Home Phone#: | Owner's Cell Phone#: |
| Attach copy of Legal Description | n of the Proposed Site |
| Property Tax ID #: | |
| Address of Property Involved: | |
| Cross Roads Closest to Site: | |
| Intended Land Purpose, Attach Copie | es if Necessary: |
| A Site Plan is Required. Please attach | a site plan to this application. It shall include the following |
| information & be drawn up to these I | ninimum standards. |
| (a) Use a <u>scale of not less than</u> 1" equals 50' if a 3 acres or more. | the subject property is less than 3 acres & 1" equals 100' if property acreage i |
| (b) Date site plan was drafted, the scale the site | plan was drawn to & a north point. |
| (c) The dimensions of all lot & property lines s | howing the relationship of the subject property to abutting properties. |
| (d) The location of existing & proposed structu | res on the subject property & all existing structures within 100' of the property |
| (e) The location of all existing & proposed driv | res & parking areas. |
| (f) The location & right-of-way widths of all at | outting streets & alleys. |
| (g) The names & addresses of the architect, pla | nner, designer or engineer responsible for the preparation of the site plan. |
| (h) Attach 10 copies of the site plan (original and | nd 9 copies) |
| Applicant's Signature: | |
| Note: Special Land Use Permit | t may be reviewed and/or withdrawn at any time if |

Return or Mail Application To: Lyle M. Fryers 5280 Mertz Rd.

requirements of zoning ordinances are not met.

Mayville, MI 48744

| Applicant Not to write on This I | rage |
|---|-------|
| Proof Of Ownership Provided? Yes or No: | |
| Is a Land Contract or Warranty Deed Involved? Yes or No: | |
| What Proof of Ownership was Provided? | |
| Zoning Board Approval Date: | |
| Special Conditions Section | |
| Are There Special Conditions? Yes or No: | |
| List the Special Conditions Specifically Applying to This Permit. Atta Are Additional Sheets Attached? If Yes, How Many? | - |
| The Special Conditions Applying to This Pern | |
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| Note: Special Land Use Permit may be reviewed and/or wrequirements of zoning ordinances are not met. By signing below adhere to the provisions set with this Special Land Use permit: | • |
| Applicant's Signature | Date: |
| Zoning Administrator's Signature: | Date: |