

APPLICATION FOR
ZONING BOARD OF APPEALS

CITY OF DAVISON

200 E. FLINT ST.
SUITE 2
DAVISON, MI 48423
810.653.2191

www.cityofdavison.org

(For City Use Only)

Application Number: _____

Date Received: _____

Application Fee: _____

Meeting Date: _____

Name of Applicant: _____ Phone: _____ Cell: _____

Applicant's Address: _____

Address of Property Involved in this Appeal: _____

Name of Proposed Development: _____

Name and address of every other person, firm or corporation having legal equitable interest in this property: (Attach additional sheets if necessary)

Name: _____ Address: _____

Name: _____ Address: _____

General Location of Property: _____
(Nearest Crossroads or Intersections)

Legal Description: (Attach legal if necessary) _____

Current Zoning: _____ Parcel(s) PID # : _____

Parcel Size: (Road Frontage) _____ (Lot Depth) _____ (Acreage) _____

Proposed Use of Property: _____

Proposed or Type of Appeal: Interpretation Variance Adjustment

Applicant's must attach a statement giving the facts of the Appeal(s), along with a Site Plan showing dimensional elements for which a variance(s) is requested or dimensional relationships of the subject lot or property to the structures on all adjacent lots. To obtain a variance, the applicant must submit an affidavit indicating that a "practical difficulty" exists for the property as stated in Section 1264.05 (c) of the Zoning Ordinance. Applicant's may provide the necessary information on the back side of this application.

The undersigned, having been denied a permit, and/or a certificate of Occupancy by the Building Official, do hereby respectfully make application and petition for an appeal under the provisions of the Ordinances of the City of Davison and in support of the application and the information as required by the Chapter 1264 of the Zoning Ordinance has been provided.

Signature

Date

