

Eureka Charter Township

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ZONING BOARD OF APPEALS APPLICATION FOR VARIANCE

Application Base Fee \$250.00

1. Street Address and/or Location of Request: _____

2. Parcel Identification Number (Tax I.D. No.): # _____

3. Applicant's Name: _____ Phone Number _____

Address: _____
Street City State Zip

Fax Number _____ Email Address _____

4. Are You: Property Owner Owner's Agent Contract Purchaser Option Holder

5. Applicant is being represented by: _____ Phone Number _____

Address: _____

6. Present Zoning of Parcel _____ Present Use of Parcel _____

7. Check below for the item which a variance is being requested:

- | | |
|--|---|
| <input type="checkbox"/> Lot Coverage | <input type="checkbox"/> Accessory Building Use |
| <input type="checkbox"/> Lot Width | <input type="checkbox"/> Lot Size / Area |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Parking |
| <input type="checkbox"/> Height Requirements | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Sign | <input type="checkbox"/> Setbacks |
| | <input type="checkbox"/> Other |

8. Please state the reason(s) for the variance request and your intended uses:

The facts presented above and on the following page(s) are true and correct to the best of my knowledge.

Signature: _____ Date: _____

Type or Print Your Name Here: _____

Property Owner Approval: As owner I hereby authorize the submittal of this application and agree to abide by any decision made in response to it. I further agree to permit members of the Planning Commission, Township Board, and other authorized Township officials to enter the above-mentioned property.

Owner

Date

The following provisions of the Eureka Charter Township Zoning Ordinance (Section 21.07) must be met in if a variance is to be granted by the Zoning Administrator. Please respond to each of the four criteria as it pertains to the request.

A. That the requested variance is not contrary to the public interest or to the intent and purpose of this Ordinance.

B. That the requested variance is not necessitated by any self-created condition or action taken by the applicant or property owner.

C. That there are exceptional or extraordinary circumstances or physical conditions such as narrowness, shallowness, shape, or topography of the property involved, or to the intended use of the property that do not generally apply to other property or uses in the same zoning district.

D. That the variance is necessary for the preservation of a substantial property right possessed by other properties in the same zoning district. Increased financial return shall not be deemed sufficient to warrant a variance.

Please provide with this application scaled drawings showing property boundaries, all connecting roads, existing easements, all existing buildings on the site and within 100' of this site or other supporting documentation if appropriate to the request.

This application must be filled out completely and returned to the Eureka Township Office with the \$250.00 base fee prior to scheduling a special Zoning Board of Appeals hearing.

Office Use Only

Date Filed: _____ Amount Paid: _____ Hearing Date: _____

(circle one) **APPROVED/DENIED** (Decision for denial to be detailed on attached)

Approval Comments/Conditions _____

Approval Given By: _____

Issued Date _____ Permit number _____

**Send Copy to Assessor upon Approval
Form Approval Good for One (1) Year from Date of Approval**