



buchanantownship.net

Zoning Board of Appeals Application

Rich Kubsch, Building Official 695-6442 x15
 Ken Simpson, Electrical Inspector 471-5869
 Ken Jewell, Plumbing and Mechanical Inspector 409-6021
 Eileen Glick, Zoning Enforcement Officer 591-7982
 Instructions on reverse side. Submit all applications at the township hall
Department of Building, Inspections, and Zoning

Buchanan Township
15235 Main St.
Buchanan, MI 49107
Tel: (269) 695-6442 Fax:
(269) 695-7715

Appeal number: (township use only):

Street Address of property in question:	Property ID #: 11-06- (township use only)	Authority: P.A. 230 of 1972, as amended Completion mandatory to obtain permit Penalty: Permit cannot be issued.
Zoning of Property:	Use of Property:	Application fee \$400: (plus \$500 min for escrow)
Ordinance section regulating request:	Application complete signature of zoning official:	Fees paid/receipt #:

I. Check or circle the appropriate box below and explain your request on the following form:

VARIANCE REQUESTED:	INTERPRETATION REQUESTED:	SPECIAL PERMISSION:	OTHER:
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II. VARIANCE PROPERTY LOCATION / OWNER: Building department may attach county sheet to verify information.

Location street address: (Street number and street name):	Is a drawing available for this project? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not required		
Owner's street address if mailing address is other than address above:	Owner's City of mailing:	Owner's State mailing:	Zip:
Email address of owner or applicant for communication via web:	Phone:	Cell phone:	Fax:

III. APPLICANT INFORMATION:

Name of applicant:	Interest in property <input type="checkbox"/> Owner <input type="checkbox"/> Purchaser <input type="checkbox"/> Land Contract		
Street address if mailing address is other than address above:	Applicants's City of mailing:	Applicant's State:	Zip:
Provide proof of authorization to represent owner: attach to application.	Contact information: Phone or cell:	Email:	Please also attach any prior zoning board of appeal action to application.

IV. ZBA APPEAL ACTION REQUESTED:

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V. THE REASON FOR THIS REQUEST IS (UNIQUENESS, SEEKING RELIEF FROM):

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VI. WHAT IMPACT WOULD YOUR REQUEST HAVE ON ADJACENT NEIGHBORS, MITIGATION METHODS?

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VII. SIGNATURE OF APPLICANT:

The undersigned acknowledges that if a Variance is granted or other decision favorable to the undersigned is rendered upon this application, said decision does not relieve the undersigned from compliance with all other provisions of applicable Township Ordinances, and the undersigned affirms that the answer and statements herein contained and the information Herewith submitted are in all respects true and correct, to the best of his/her knowledge.	
Signature of Applicant: X	Date

VIII. PERMISSION TO INSPECT THE SUBJECT PROPERTY BY THE BOARD MEMBERS AND TOWNSHIP:

I grant permission for Buchanan Township employees and or agents to enter my property for the purpose to gather site information relative to the above request.	
Signature of applicant:	Date

IX. NOTIFICATION OF HEARING:

This will confirm the receipt of your application for a hearing before the Buchanan Township Zoning Board of Appeals. Your hearing will take place on the date as written below at 7pm at the Township Hall at 15235 N Main St, BUCHANAN, MI 49107.

The Zoning Board of Appeals is a board made up of five Township of Buchanan residents who decide action on requests where it is appropriate to interpret the intent of the Ordinances of Buchanan in cases where either the Building Official or Zoning Official have denied a permit or interpreted the Ordinance in a manner which is consistent with the Ordinances from which a resident determines they need to seek relief. Any action by the Zoning Board of Appeals is binding and may be appealed by you only to a local court.

Please read the Buchanan Township Ordinance chapter relating to the Zoning Board of Appeals. This is a legal action. Notices must be sent to all properties owners surrounding the property. The application fee must be accompanied by an additional fee (set by the Township Board of Trustees) to offset the cost of professional planning services.

When filling this form out, please follow the instructions below or use any available space on the rear of the form to write out any additional information you need to provide but do not have room enough on the front face of this application. The following numbers correlate to the Roman numerals on the application:

- I. Please check or circle the action you wish the Zoning Board of Appeals to consider. You may wish to talk to the zoning official or the building official before filling out the application.
- II. Property and Owner information: Please supply the address of the property on which the appeal is sought. Mailings will require full mailing information including zip codes; please also supply as much telephone, fax, and cell phone information as you are able to provide for the Owner.
- III. If the applicant is not the same as the owner, please supply a separate authorization in writing to represent the Owner. Mailings will require full mailing information including zip codes; please also supply as much telephone, fax, and cell phone information as you are able to provide for the Applicant.
- IV. Action requested: **The board may only act upon what you request.** The requested action cannot be changed at any time without notification to the adjoining property owners according to State law within the required notice period.
- V. Reason for the request: Focus on the legal aspects of the request including uniqueness of the property and the reason for the hardship, again in legal terms. You may wish to consult counsel.
- VI. Impact on adjoining properties: This is an important recognition of the master plan and Ordinance requirements, of your neighbor's existence, and of the long term affect on the Township.
- VII. Signature is requested two times here and
- VIII. Here (to allow permission for the Board to enter for purposes of obtaining information relating to the hearing).
- IX. You will receive public notice of the hearing. Please call for information any time if you have not received this notification. Zoning Board of Appeals attempts to meet the third Monday of each month as noticing requirements can be met.

Please bring information requested, along with signed (2x) application and fees to the Buchanan Township Hall. An application is not complete without fees. The application will be processed by forwarding to the Zoning Official to see if the application is complete. If appropriate, plans will be reviewed. A Hearing Meeting time will be set based on the availability of the five members and upon the ability of the Township to send notice before the meeting to neighbors pursuant to state statute. You will receive notification of the time of the meeting. We look forward to serving your needs and request. Please call any time if you have questions.

Form revised: 2015.9.1