

Milton Township
Zoning Board of Appeals

APPLICATION FOR HEARING / NOTICE OF APPEAL

PERMIT # _____

OWNER:

AGENT:

Name _____

Name _____

Street _____

Street _____

City _____

City _____

Telephone/FAX _____

Telephone/FAX _____

Mailing Address _____

I. ACTION REQUESTED:

I (we) the undersigned request a hearing for the purpose indicated below:

- _____ Dimensional Variance
- _____ Ordinance or Map Interpretation
- _____ Appeal of Administrative Decision

The applicant / appellant requests: _____

II. PROPERTY INFORMATION:

A. Property Tax Number 05-12- _____ - _____ - _____

B. List all Deed Restrictions or attach a copy _____

C. Attach a SITE PLAN, with the proposed location of the building, measurements, and all other pertinent information. (See "Example: SITE PLAN" attached)

D. Give any special directions required to locate your property: _____

E. Present use of property is: _____

III. JUSTIFICATION FOR GRANTING A DIMENSIONAL VARIANCE:

The applicant must show that strict application of the provisions of the zoning ordinance to the property would result in *practical difficulty*; That the variance would do *substantial justice* to the applicant and other property owners affected; That the plight of the owner is due to *unique* characteristics; and, That the problem is not *self-created*.

- A. Will strict compliance with the requirements of the Ordinance result in *practical difficulty*, depriving the applicant use of the property for a permitted purpose enjoyed by other owners in the same zoning district? _____

- B. Will the variance requested (or a lesser, agreed variance) render *substantial justice* to applicant and to other property owners affected? _____

- C. Is the plight of the applicant due to *unique* characteristics of the property? _____

- D. Has the need for the variance been *self-created* by some action of the applicant or previous owner? _____

IV. THE APPLICANT USUALLY PRESENTS INFORMATION SHOWING THAT THE REQUESTED VARIANCE:

- A. Will not be contrary with the intent and purpose of the Zoning Ordinance;
- B. Will not cause a substantially adverse affect upon adjacent properties;
- C. Will relate only to the property under control of the applicant;
- D. Will not essentially alter the character of the surrounding area; and;
- E. Will not increase the hazard from fire, flood or similar dangers.

V. AFFIDAVIT:

The undersigned acknowledge that if a change is granted or other decision favorable to the undersigned is rendered, the said decision does not relieve the applicant from compliance with all other provisions of the MILTON TOWNSHIP ZONING ORDINANCE;

The undersigned certify that answers and statements herein contained and the information herewith submitted are in all respects true and correct to the best of his/her or their knowledge and belief; and,

The undersigned acknowledge that he/she/they are either the owners or the owner's agent and have authority to and do hereby grant permission and consent for any Milton Township official and/or Milton Township Agent to ENTER UPON THE SUBJECT PROPERTY in preparation for the Public Hearing.

Applicant(s) Signature(s)

Authorized Agent Signature

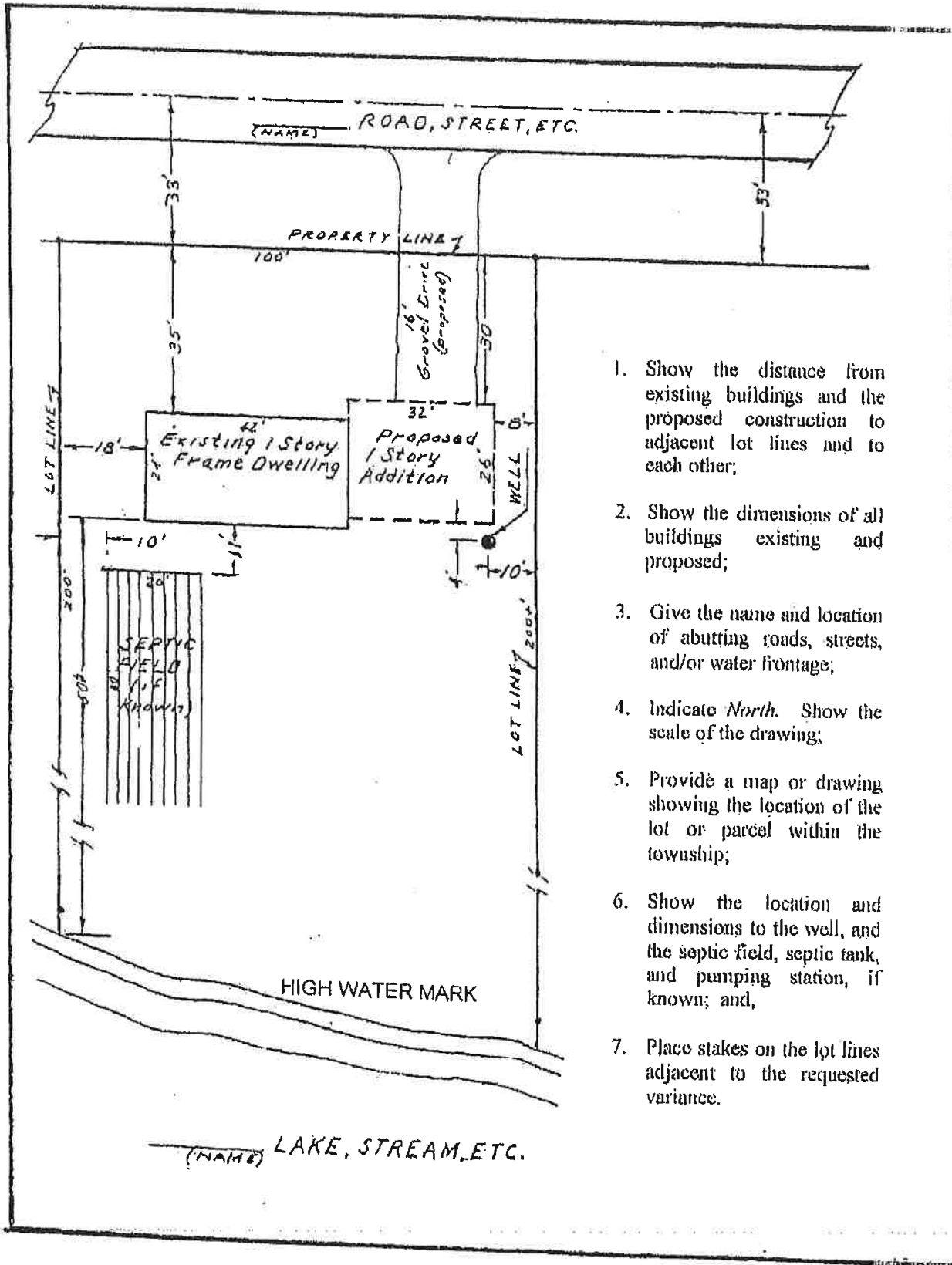
Date

Date

[Click here to go to next page](#)

Example: SITE PLAN

to be submitted
with request for
Dimensional Variance
Scale - 1 inch = 20 feet



1. Show the distance from existing buildings and the proposed construction to adjacent lot lines and to each other;
2. Show the dimensions of all buildings existing and proposed;
3. Give the name and location of abutting roads, streets, and/or water frontage;
4. Indicate North. Show the scale of the drawing;
5. Provide a map or drawing showing the location of the lot or parcel within the township;
6. Show the location and dimensions to the well, and the septic field, septic tank, and pumping station, if known; and,
7. Place stakes on the lot lines adjacent to the requested variance.

GENERAL INFORMATION

Filing Fees

Zoning Board of Appeals Hearing

\$500

Special Meeting*

\$600 (in addition to application /

hearing fee)

** All Special Meeting fees are in addition to the hearing/ application fee

When filing an application for ZBA, you may be required to submit the following:

- A. Health Department Permit
- B. Soil Erosion Permit
- C. EGLE Permit
- D. Other permits required for project as requested by the Zoning Administrator