LAKE TOWNSHIP ZONING BOARD OF APPEALS

CURRENT FEE $300.00
15580 S. Star Lake Drive
Baldwin, MI 49304
231-898-3189
Fax 231-898-3375

VARIANCE REQUEST FORM – Page One

Notice of appeal to the Lake Township Zoning Board of Appeals

Name of Appellant_____Phone #_____-_____-_____

Lake Twp. Mailing Address_____

Lake Twp. 911 Address_____

Property Tax ID Number_____

If appellant is not a resident of Lake Township, please provide the following:

Residence phone#_____-_____-_____ Work phone #_____-_____-_____

Residence mailing address_____

_____

_____

APPELLANT* MUST APPEAR AT PUBLIC HEARING

(*appellant may be represented by Counsel)

Does the Lake Twp property have a deed restriction? YES or NO (circle one)
If the answer is yes, please include a copy of the restriction w/application.

A property survey is required and it must have all relevant measurements clearly shown, such as side lot setback distances, front lot setback distance, size of structures, etc. This document must accompany the application.

In making and signing this application, I hereby grant permission to the Zoning Administrator, the members of the Zoning Board of Appeals, and the Township Supervisor to visit my property to examine what is being proposed.

SECTION I – Variance Requests

A. Type of variance being requested - DIMENSIONAL

B. Directions to site and 911 Address at site must be displayed.

C. Proposed buildings must be staked out for Z.B.A. Members inspection.

VARIANCE REQUEST FORM – Page Two

B. Describe in detail the variance being sought and provide a complete site plan, which includes all structures and relevant measurements._____
_____
_____
_____

C. Provide your basis for the Proposed Variance as it applies to the zoning code tests (pages 95, 296) which are used to approve or deny a variance._____
_____
_____
_____

SECTION II – Zoning Ordinance interpretation appeals

A. Appeal of an order issued by the Zoning Administrator
B. Interpretation of an Article of Section of the Zoning Code
C. Interpretation of the Zoning Map
D. Other – (be specific)_____
_____
_____
_____

SECTION III – Additional information the appellant wishes to provide the Zoning Board of Appeals._____
_____
_____
_____

_____ _____
Signature of Appellant Date

Office Use Only

A. Date application is received by the Zoning Administrator_____
B. Recommendation of Zoning Administrator APPROVE DENY OR ABSTAIN (circle one)
C. Basis for recommendation by the Zoning Administrator_____
_____
_____
_____
D. Fees Paid? YES or NO (circle one)
E. Date application is received by the ZBA Chairperson_____
   a. Date Set for Hearing_____
   b. Time Set for Hearing_____
   c. Decision by ZBA – APPROVED or DENIED (circle one)

NEEDED INFORMATION WITH A VARIANCE APPLICATION

Please check off and include a copy of this check sheet with your application

- ☐ INCLUDE DIRECTIONS TO SITE
- ☐ A COMPLETE SITE PLAN SHOWING ALL BUILDINGS, DECKS, CEMENT AND ALL SHEDS
- ☐ SHOW ALL SETBACKS FROM LOT LINES AND LAKES
- ☐ A COPY OF A SURVEY FOR THE SITE
- ☐ SHOW ALL SETBACKS FROM LOT LINES AND LAKES
- ☐ LAKEFRONT LOTS MUST SHOW LINE OF SIGHT
- ☐ SHOW ALL BUILDINGS AND GROUND COVERAGE SIZES
- ☐ SHOW WELL AND SEPTIC ON SITE PLAN
- ☐ INCLUDE A COVER LETTER TELLING WHY YOU NEED THIS VARIANCE
- ☐ BIG STAR LAKE OWNERS NEED A SEA LEVEL SURVEY
- ☐ FILL OUT ALL VARIANCE FORMS AND SIGN
- ☐ **ENCLOSE A CHECK FOR $280.00 MADE OUT TO LAKE TOWNSHIP**

Lake Township Zoning Board of Appeals
Lake Township, Lake County, MI

Driving Instructions to property of the variance that is being requested for:

_____

_____

_____

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PLEASE NOTE THE PROPERTY MUST BE MARKED WITH CLEARLY VISABLE SIGNS OR 911 ADDRESS NUMBER 2 WEEKS PRIOR TO HEARING