

Keene Township

8505 Potters Road Saranac, Michigan 48881 (616) 642-9809 Ionia County

Zoning Board of Appeals Application

This application must be completed in full and approved by the Township Zoning Board of Appeals before beginning any construction, excavation or use regulated by the Keene Township Zoning Ordinance. Application Fee: \$300.00.

Applicant Information							
Name							
Address							
City		_ State		Zip		_	
Phone Numbers ()	()		()		
Property Owner Information (if	different fr	om app	licant)				
Name							
Address							
City		_ State		Zip		_	
Phone Numbers ()	()		()		
Proposed Request							
Reason for Zoning Board of Appeals	hearing:						
Variance			O	rdinance	or map int	terpretati	on
Appeal from administrative de	cision		O	ther auth	orized rev	iew	
Proposed Request							
Address of Property							
City		_ Zip _					
Parcel Number 34-070-		c	r attach	n legal des	cription if n	umber no	t yet assigned
Zoning District							

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Present Use of the Property					
Present use					
If you are requesting a variance, please complete the following:					
There are exceptional or extraordinary circumstances or conditions applying to the property in question					
that do not generally apply to other properties in the same zoning district because:					
Variance is necessary for the preservation and enjoyment of a substantial property right similar to that possessed by other properties in the zoning district and in the vicinity because:					
That the building, structure, or land cannot yield a reasonable return if required to be used for a use allowed in the zoned district in which it is located because:					

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Site Plan

Include a site plan drawing showing the location of existing structures, any proposed location of any new construction or additions to any existing structures. Indicate the distances of any proposed construction to your lot lines, road right of way, easements, and shorelines. For new accessory structures also include the distance to the dwelling. Indicate any unusual physical features of the site or buildings.

Affidavit

I certify and affirm that I am the property or building owner or the owner's authorized agent and that I agree to conform to applicable zoning laws of Keene Township. I also certify and affirm that this application is accurate and complete to the best of my knowledge. I hereby give permission for Township representatives to visit this location. I understand that if my request is granted, other ordinance requirements may be applicable.

Signature		Date						
Administrative Use								
Fee paid		Date						
Date of Hearing	Date Published	Date 300' Notices sent						
Date Posted at Hall								
Application Approved								
Application Denied								
Decision and Conditions								