

ATLAS TOWNSHIP BOARD OF APPEALS
APPLICATION FOR VARIANCE

Application No. _____

Filed ____ / ____ / ____

Fee Paid: \$ _____

To the Atlas Township Board of Appeals, Atlas Township, Genesee County, Michigan:

We, the undersigned, being persons having an interest in the property hereafter described, hereby APPLY to the Atlas Township Board of Appeals to grant a variance to:

Type of variance requested: (Please print or type the following information)

In support of this application, we agree to pay any fee your Board requires, and submit the following information, which we represent to be true and complete:

Name(s) of Owner(s): _____

Address of Owner(s): _____ Phone: (____) _____

Names of Applicant(s): _____

Address of Applicant(s): _____ Phone: (____) _____

Names of all other persons having an interest in the property, and type of interest: _____

Legal Description of property for which application for variance is made: _____

Parcel Number: _____ Size of Lot: _____

Present Use: _____ Date such use commenced: ____ / ____ / ____

Present Zoning Classification: _____

Reasons for this application are as follows: _____

NOTE: Certified land surveys of all parcels resulting from a division or combination are required for final approval.

Public Hearing Date ____ / ____ / ____

Notice to property owners within 300 feet sent: _____

Signature of Applicant: _____

Name of Representative if not owner/applicant: _____

Signature of Owner(s): _____

Notary: _____

Note: If application is signed by owner outside the presence of an Atlas Township employee or agent, a notary signature is required.

If applicant is not the owner of the property for which a variance is requested, then owner must sign application as well as the applicant.

ATLAS TOWNSHIP ZONING BOARD OF APPEALS
VARIANCE REQUEST

AFFIDAVIT

In accordance with Section 13.03 (B) (3). Explain the following: (Attach additional pages if necessary.)

- A. How the strict enforcement of the provisions of the Township Zoning Ordinance would cause an unnecessary hardship and deprive the owner of rights enjoyed by all other property owners owning property within the same Zoning District.

- B. The conditions and circumstances unique to the property, which are not similarly applicable to other properties in the same Zoning District.

- C. The conditions and circumstances unique to the property were not created by the owner, or his predecessor in title, within the time following the effective date of the provisions alleged to adversely affect such property.

- D. Why the requested variance will not confer special privileges that are denied other properties similarly situated and in the same Zoning District.

- E. Why the requested variance will not be contrary to the spirit and intent of this Zoning Ordinance.

You or your representative must represent the request before the Zoning Board of Appeals.

No nonconforming use of neighboring lands, structures, or buildings in the same district, and no permitted or nonconforming use of lands, structures, or buildings in other districts shall be considered grounds for the issuance of a variance.

If approved, your variance is good for one (1) year from the date of approval unless otherwise specified, and must be consumed within that time period.

If circumstances require that you need an extension to your granted variance, you may notify the Zoning Board to schedule a hearing. Your hearing date **must** be before your expiration date.

The undersigned deposes that the foregoing statements and answers and accompanied information are true and correct. By signing this application, you hereby grant permission to the Atlas Township Board, Planning Commission and Board of Appeals as well as any others as may be required or requested, to physically inspect the subject property.

Date Filed: _____ / _____ / _____

Signature of Applicant: _____

DO NOT WRITE BELOW THIS LINE

Application Number: _____

Parcel Number: _____

Date of Hearing: _____ / _____ / _____

ATLAS TOWNSHIP
Variance Review Procedures
APPLICATION CHECK LIST

_____	1.	Completed Application Form
_____	2.	Site Plan showing all required information
_____	3.	Affidavit
_____	4.	Application Fee
_____	5.	Other (as may be requested):

NOTE: A hearing will not be scheduled until the complete application package, containing all of the requested information, has been filed with the Atlas Township Clerk.