



Zoning Board of Appeals Request for Variance

CHARTER TOWNSHIP OF GRAND BLANC
5371 S. Saginaw Street, PO Box 1833
Grand Blanc, MI 48480
Phone: (810) 424-2766 Fax: (810) 424-2767
ZONING ORDINANCE IS AVAILABLE ON LINE
www.twp.grand-blanc.mi.us

YOUR APPLICATION MUST BE RETURNED TO THE PLANNING AND ZONING DEPARTMENT FOUR (4) WEEKS PRIOR TO THE MEETING DATE.

Date: _____

ZBA # _____

Address of Property	
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Name of Applicant(s)	
Address, City and Zip	
Phone / fax	
E-Mail	

Location of Property <i>Include cross-streets and directions, name of subdivision, etc.</i>	
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Zoning Classification of Property	
Legal DESCRIPTION PLEASE <i>attach additional sheet(s), if necessary, such as mortgage or certified survey.</i>	
Do you own the property? <i>If not, indicate Power of Attorney or provide Letter of Authorization from Owner.</i>	



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<i>Section of Ordinance from which Variances are requested. Attach additional sheets if necessary.</i>	<i>Section</i>	<i>Requirement</i>	<i>Proposed</i>
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REASON FOR VARIANCE REQUEST: Section 7.4 requires the Zoning Board of Appeals to consider the following items before approving a variance. Please complete the items below using the attached sheet as a guide:

<i>Practical difficulty:</i>	
<i>Unique Situation:</i>	
<i>Not self-created:</i>	
<i>Substantial justice:</i>	
<i>Minimum variance necessary:</i>	
<i>Compliance with other laws:</i>	

Applicant hereby consents to allow Township representatives access to property.

Signature of Applicant: _____ Date: _____

Printed Name of Applicant: _____

NOTICE

A BUILDING PERMIT MUST BE OBTAINED AFTER APPROVAL OF A VARIANCE. THIS REQUEST FOR VARIANCE DOES NOT INCLUDE ANY BUILDING PERMIT FEES REQUIRED BY THE CHARTER TOWNSHIP OF GRAND BLANC. PLEASE INCLUDE A SURVEY OR PLOT PLAN (SEE SAMPLE ATTACHED). ALSO INCLUDE DRAWINGS, PICTURES, AND ANY OTHER DOCUMENTATION THAT THE BOARD MAY NEED TO CONSIDER YOUR REQUEST.

STAFF USE ONLY

DATE RECEIVED: _____

FEE PAID: _____