

ESTABLISHED 1835



Variance Request Application Form

- 18027 Old US 12 • Chelsea, MI 48118 • (734)475-8890 • FAX (734)475-8905
- www.sylvan-township.org

Staff Use Only	Property Address:	
Fee:	ZBA Number:	Application Date:

1. Property Address _____

2. Variance Request Summary (If multiple variances are requested list all):

3. Items Required: (Please check items submitted)

- _____ A. A Zoning Compliance Certificate General Application, a Zoning Compliance Certificate Application for the Zoning District of the subject property, and a Variance Request Application filled out completely and signed.
- _____ B. All items required in the General Planning Application.
- _____ C. Fee \$575 for single family and small commercial, \$700 all others. \$450 for each addition hearing.

4. Expiration:

Each variance approved shall expire and be of no effect unless the construction authorized by the variance has been commenced within 180 days after the date of approval and has been pursued diligently to completion, or the occupancy of land or buildings authorized by the variance has commenced within 180 days of the date of approval. (Chapter 30, Section 30-149)

5. Certification and Signature of Applicant and/or Owner:

I hereby certify that I have read the Sylvan Township Zoning and Private Road Ordinances and the foregoing statements and attachments are true and correct to the best of my knowledge and belief and I agree to abide by all applicable conditions and ordinances. I agree that Sylvan Township employees and their representatives have the authority to inspect the property listed on this application. Further, I acknowledge that approval of any special use permit grants only that which was represented to the Planning Commission at the Public Hearing. No other use may be substituted without a rehearing.

_____/_____
Signature of Owner/Date¹

_____/_____
Signature of Applicant /Date

Staff Use Only			
Notice Date		/ /	Hearing Date
Continued Date		/ /	/ /
Decision:	Approve		
	Deny		
	Approve w/Conditions		
List of Conditions:	_____ _____ _____ _____		
Zoning Administrator	_____		Date / /

¹ The owner's signature is required. If the owner does not sign this document a letter of owner's authorization is required. This authorization letter should state that the owner has allowed the applicant to apply for the special use permit. This authorization letter needs to be signed and dated by the property owner.