

Village of Ravenna

12090 CROCKERY CREEK DRIVE • RAVENNA, MICHIGAN 49451 • TELEPHONE (231) 853-2360 • FAX (231) 853-6443

APPLICATION FOR AMENDMENT OF THE ZONING MAP (REZONING)

Date: _____ Application Fee: \$ _____
(must accompany completed application)

1. Property Address for Appeal/Variance: _____
Parcel Number: _____
Zone District: _____ (obtain from Zoning Administrator)

Legal Description:

_____ (include additional sheets if needed)

2. Applicant Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Relationship of Applicant to Property Owner: _____

3. Property Owner: _____
Address: _____
City, State, Zip: _____
Phone: _____

4. Proposed Zone District(s): _____

5. Plot Plan. Attach a plot plan of the subject property, showing dimensions and area of the lot or parcel in square feet or acres, and also showing the zoning district of all abutting properties. (Note: A plot plan based on an accurate certified property survey is strongly recommended.)

(continued on reverse side)

6. Applicant Certification:

By my signature below, I certify that I am the property owner, agent of the owner, or authorized by the property owner to submit this application. Further, I certify that the information provided within or attached to this application is, to the best of my knowledge, true and accurate. I hereby authorize the Village to enter the property associated with this application for purposes of conducting necessary site inspections.

Date: _____

Applicant's Printed Name

Applicant's Signature

FOR VILLAGE USE ONLY:

Date Application Received: _____

Application Fee Received: \$ _____

Escrow Payment Received: _____

Escrow Payment Charged: _____

Approved: _____

Denied: _____

Approved with the following condition(s): _____

Denied for the following reason(s): _____

Zoning Administrator/Village Official: _____ Date: _____
