



IRA TOWNSHIP

7085 Meldrum Road
Fair Haven, MI 48023

Phone: (586) 725-0263
Fax: (586) 725-8790

ZONING BOARD OF APPEALS APPLICATION

APPLICATION FEE \$525

Note: Additional fees may be assessed by Township Planning and/or Engineering Consultants

The Zoning Board of Appeals meets on the third Tuesday of each month. Applications must be filed at least forty (40) days prior to a scheduled meeting. The Township must notify the surrounding property owners within a 300-foot radius from the address on this application.

Please submit the following documents:

1. Application – Submit 10 copies of the completed Zoning Board of Appeals application.
2. Site Plan – Submit 10 copies of the site plan drawn to scale based on a land survey prepared and sealed by a registered land surveyor or registered engineer (if applicable) showing: Property lines and dimensions, all structures and buildings (existing and proposed), all setback dimensions, driveways, and all adjacent uses and structures within 50 feet of all property lines, and within 350 feet of the variance itself in the AEC district.
3. Proof of ownership - *If the applicant is not the owner of the property, please provide a document (land contract, purchase agreement, option to purchase, etc.) that indicates the applicant’s interest in the property as well as a notarized letter from the property owner indication no objection to the request
4. Any other information which the applicant feels will aid the Township in its review.

Your application will not be considered unless all required information is provided at the time of submission, and all required fees have been paid.

Building permits must be obtained within one year of approval of your variance approval

Address of property where variance is being requested:

Number	Street Name	Parcel #

Applicant/Owner Information

Applicant(s) Name: _____

Address: _____

Street	City	State	Zip Code
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Phone: _____ Email: _____

Owner Name (if different from Applicant): _____

Address: _____

Phone: _____ Email: _____



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Appeal Request Information:

Type of Review Requested:

Variance from Zoning Ordinance regulation: _____
Interpretation of Zoning Ordinance: _____ (only complete project description section)
Temporary use: _____

Current Property Status:

Subject property is zoned: _____
Total square footage of property: _____ Circle one: Corner lot Interior lot Waterfront lot
Number of structures on property: _____ Percentage of lot coverage by structure/s _____%
Type/Use/Size of each structure: _____

Project Description: for a variance from a Zoning Ordinance regulation, describe the proposed project and variance requested including details about each structure affected:

Percentage of lot coverage by structure/s, including proposed variance: _____%
Proposed overall building height (if applicable): _____



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**For a variance to be granted, the Applicant must prove a practical difficulty exists
RESPONSES TO ALL OF THE FOLLOWING MUST DEMONSTRATE
A PRACTICAL DIFFICULTY**

1. That there are exceptional or extraordinary circumstances or conditions applicable to the property involved or to the intended use of the property that do not apply generally to other properties or classes of uses in the same district or zone.

Explain:

2. That such variance is necessary for the preservation and enjoyment of a substantial property right possessed by other property in the same zone and vicinity.

Explain:

3. That the granting of such variance or modification will not be materially detrimental to the public welfare or materially injurious to the property or improvements in such zone or district in which the property is located.

Explain:

4. That the granting of such variance will not adversely affect the purpose of objectives of the comprehensive Plan of the Township.

Explain:



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I (we) hereby attest that all the information provided in this application and attachments submitted, are true and correct to the best of my (our) knowledge and belief:

Applicant's Signature

Date

Property Owner's Signature

Date

TOWNSHIP USE ONLY

Appeal #: _____

Fee Amount Paid: \$ _____

Date Paid: _____