PRESQUE ISLE TOWNSHIP
APPLICATION FOR:

Check One	Cost
_____ Rezoning	$250.00
_____ Site Plan Review	$50.00 Simple – At cost if professional service needed
_____ Planned Unit Development	$100.00 app. - $200.00 Prelim Review - $200.00 Final
_____ Special Use Permit	$25.00
_____ Variance & Appeals	$800.00 – Special Variance Meeting (Outside a Quarterly Meeting) $150.00 quarterly meeting (Any additional professional fees to be paid by the applicant)
_____ Lot Split	See Lot Split Division Form

Applicant:

Name _____

Address _____

Phone _____

Owner:

Name _____

Address _____

Phone _____

Property:

Address _____

Location _____

Parcel # _____

Current Zoning District _____

Requested Zoning _____

Property Size _____

Legal Description _____

I hereby grant permission for members of the Presque Isle Township (Planning Commission), (Board of Appeals), (Township Board) to enter above described property for the purpose of gathering information related to this application. (This is optional and will not affect any decisions on your application).

_____ Signature

____/____/____ Date

NOTE: Fees cover Publications, Mailings, Legal Costs and Committee Costs.

VARIANCE

PLEASE NOTE: ALL QUESTIONS MUST BE ANSWERED COMPLETELY. IF ADDITIONAL SPACE IS NEEDED, NUMBER AND ATTACH ADDITIONAL SHEETS. THE TOTAL NUMBER OF SHEETS IS: _____.

A PREVIOUS APPLICATION HAS/HAS NOT (CIRCLE ONE) BEEN MADE WITH RESPECT TO THESE PREMISES IN THE LAST _____ YEARS. (IF A PREVIOUS APPEAL, REZONING OR SPECIAL USE PERMIT APPLICATION HAS BEEN MADE, STATE THE DATE, NATURE OF ACTION REQUESTED AND THE DECISION) DATE: _____ ACTION REQUESTED: _____,
DECISION: APPROVED_____ DENIED_____.

I. PROPERTY INFORMATION:

A. LIST ALL DEED RESTRICTIONS, ATTACH ADDITIONAL SHEETS IF NECESSARY

_____

_____

_____

_____

B. NAMES AND ADDRESSES OF ALL OTHER PERSONS, FIRMS OR CORPORATIONS HAVING A LEGAL OR EQUITABLE INTEREST IN THE LAND:

_____

_____

_____

C. PRESENT USE OF PROPERTY: _____

_____

_____

D. PROPOSED USE OF THE PROPERTY, PROVIDE A DETAILED STATEMENT AS TO HOW THE PROPERTY WILL BE USED. INCLUDE WHO WILL USE THE PROPERTY, FOR WHAT PURPOSE, HOURS OF OPERATION, INDOOR AND OUTDOOR ACTIVITIES, PARKING NEEDS.

E. ATTACH A SITE PLAN, DRAWN TO THE SCALE SPECIFIED AND ALL OTHER INFORMATION REQUIRED BY ARTICLE 17 SECTIONS 17.3 OF THE PRESQUE ISLE TOWNSHIP ZONING ORDINANCE. (Copy attached for your reference). The site plan must be complete for your application to be considered.

F. PROVIDE A WRITTEN DETAILED STATEMENT OF THE IMPROVEMENTS TO BE PLACED ON THE PROPERTY. INCLUDE SUCH DETAILS AS THE MATERIALS TO BE USED, THE NAME OF THE CONTRACTOR, SIGNAGE, PARKING, LANDSCAPING, UTILITIES, SEPTIC (SIZE & LOCATION) DRAINAGE, GRADING OF THE SITE, FIRE SUPRESSION PLANS AND COLOR SCHEME.

G. ESTIMATED DATE CONSTRUCTION WILL BEGIN: _____

H. ESTIMATED COMPLETION DATE OF CONSTRUCTION: _____

I. NEEDED SERVICES, INDICATE THE SERVICES NEEDED FOR THIS USE SUCH AS FIRE SUPRESSION, GARBAGE PICK-UP, POLICE.

J. STATE THE VARIANCE NEEDED:

_____

_____

_____

K. STATEMENT OF JUSTIFICATION FOR REQUESTED ACTION:

II. STATE SPECIFICALLY THE REASONS WHY THIS VARIANCE REQUEST SHOULD BE APPROVED:

III. IMPACTS ON ADJACENT PROPERTIES AND THE NEIGHBORHOOD:

1. WHAT IMPACTS ON ADJACENT PROPERTY ARE ANTICIPATED? _____

_____

_____

_____

_____

2. WHAT STEPS WILL BE TAKEN TO MITIGATE ANY NEGATIVE IMPACTS? _____

_____

_____

_____

_____

3. WILL THE PROPOSED USE ADVERSELY AFFECT THE HEALTH, SAFETY OR ENJOYMENT OF PROPERTY OF PERSONS RESIDING OR WORKING IN THE NEIGHBORHOOD? _____

_____

_____

_____

_____

_____

4. WILL THE PROPOSED USE BE DETRIMENTAL TO THE PUBLIC WELFARE OR INJURIOUS TO PROPERTY OR IMPROVEMENTS IN THE NEIGHBORHOOD? _____

_____

_____

_____

IV. AFFIDAVIT:

THE UNDERSIGNED AFFIRMS THAT HE/SHE OR WE IS/ARE THE OWNER OF THE PROPERTY INVOLVED IN THE APPLICATION AND THAT IF THIS REQUEST IS GRANTED, THAT IN ACCORDANCE WITH THE PRESQUE ISLE TOWNSHIP ZONING ORDINANCE, ACTUAL CONSTRUSTION IN ACCORDANCE WITH THE PLANS HEREWITH SUBMITTED WILL BE BEGUN WITHIN SIX (6) MONTHS FROM THE DATE OF THE GRANTING OF THE SPECIAL USE PERMIT AND WILL BE COMPLETED WITHIN EIGHTEEN (18) MONTHS FROM SAID DATE. THAT I OR WE, AM (ARE) ABLE FROM A LEGAL, FINANCIAL AND PHYSICAL BASIS TO DO/SAY; AND THAT THE ANSWERS AND STATEMENTS HEREIN CONTAINED AND THE INFORMATION HEREWITH SUBMITTED ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF HIS/HER OR OUR KNOWLEDGE AND BELIEF.

APPLICANTS SIGNATURE(S) _____

_____

DATE: _____