

**RILEY TOWNSHIP
13042 BELLE RIVER RD.
RILEY TOWNSHIP, MI 48041
Phone (810)392-2326 FAX (810)392-2918**

Request for Zoning Variance Case #: _____

APPLICANT INFORMATION:

Owner / Applicant Name: _____ Phone: _____
Mailing Address: _____ City: _____ State: _____ Zip Code: _____

LEGAL OWNER'S NAME AND ADDRESS:

Name (if not applicant): _____ Phone: _____
Mailing Address: _____ City: _____ State: _____ Zip Code: _____
Signature of Legal Owner: _____

PROPERTY ID# 74-29-____ - ____ - ____ COMMON DESCRIPTION OF PROPERTY

(Address of Property) _____

LEGAL DESCRIPTION OF PROPERTY: (May attach or provide on site plan)

DESCRIPTION OF VARIANCE REQUESTED FROM THE PROVISIONS OF THE RILEY TOWNSHIP

ZONING ORDINANCE: (Describe nature of the request and the Section Number of Ordinance, if applicable and reason for request.) _____

Applicant by signing below grants the Zoning Board of Appeal Members the option to examine the property up to ten (10) days prior to the Public Hearing. No discussion with the applicant and/or owner may take place.

DATE: _____ Signature of Applicant: _____
Signature of Legal Owner: _____ Signature of Legal Owner: _____

****FOR ZONING BOARD OF APPEALS/OFFICE USE ONLY****

Zoning Administrator Site Plan Approval: _____ Date: _____

Date Application Received: _____ ZBA Fee Paid: _____ Date: _____ Deposit Paid: _____ Date: _____

_____ Denied

_____ Approved

_____ Approved with Stipulations _____

Zoning Board of Appeals Meeting Date: _____ Signature of Chairperson: _____

