

RILEY TOWNSHIP
GUIDE TO REZONING PROCEDURE

A. APPLICATION FORM

The application form for rezoning should be obtained from the Township Clerk. The applicant should return twelve (12) copies of the completed form to the Township Clerk at least seven (7) days prior to a regularly scheduled meeting of the Planning Commission. Twelve (12) copies of the sketch plan should accompany the application along with the fee established by the Township Board.

B. REQUIRED PUBLIC HEARING

A public hearing, as required by State Law, will be scheduled by the Planning Commission if all required information has been supplied by the applicant. Copies of the full application will be submitted for review and recommendation to the following, as needed:

- 1) Township Planner
- 2) Township Engineer
- 3) Fire Department
- 4) School District

C. PUBLIC HEARING PROCEDURE AND RECOMMENDATIONS

A notice of public hearing will be sent to all affected residents and property owners within 300 feet and published twice in the newspaper, as required by law. The applicant or his representative must appear at the public hearing and make a brief presentation explaining his request. After public comment has been heard on the request, the public hearing will be closed by the Planning Commission.

The Planning Commission will make a recommendation for approval or denial to the Township Board at a subsequent regular meeting. A copy of the Commission's recommendation will also be forwarded to the St. Clair County Planning Commission. The County has a Statutory period of 30 days to review the matter and also forward its recommendation to the Township Board.

D. TOWNSHIP BOARD ACTION

Once the Township Board has received the recommendations of the Township Planning Commission and the County Planning Commission, they will take final action to approve or deny the request at a regular meeting. Because rezoning is a legislative action, only the Township Board has the final authority to approve or deny requests for rezoning.

**RILEY TOWNSHIP
APPLICATION FOR REZONING**

APPLICANT'S NAME: _____

ADDRESS OF APPLICANT: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE NUMBER OF APPLICANT: _____

LEGAL OWNER'S NAME:(If not applicant) _____

LEGAL OWNER'S ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PHONE NUMBER OF LEGAL OWNER: _____

PROPERTY I.D.# 74-29- _____

PRESENT ZONING OF PROPERTY: _____

ZONING REQUESTED: _____

PURPOSE FOR REQUEST TO REZONE: _____

ESTIMATED COMPLETION DATE OF PROPOSED PROJECT: _____

PROVIDE TWELVE (12) COPIES OF THIS COMPLETED FORM AND A SURVEY(OR SKETCH TO SCALE) OF THE PROPERTY, WHICH SHALL INCLUDE THE FOLLOWING:

- 1.) Size and shape of the property, drawn to scale.
- 2.) Size and location of all existing and proposed buildings.
- 3.) Parking areas existing and/or proposed and the total number of spaces.
- 4.) Proposed points of ingress and egress to site.
- 5.) Expected number of (peak) employees.
- 6.) Location and use of adjacent buildings.

Applicant's Signature

Legal Owner's Signature

DATE: _____

Legal Owner's Signature

*****Office Use Only*****

Date application received: _____ Rezoning Fee Paid: _____

Deposit Fee Paid: _____

Date of public hearing: _____ Planning Commission Recommendation: _____

Date sent to Co. Planning: _____ Date sent to Township Board: _____

Township Board Action: _____ Date of Township Board Action: _____

Supervisor

Clerk