

VILLAGE OF ELK RAPIDS

PHONE: 231-264-9274 FAX: 231-264-6337

ZONING AMENDMENT REQUEST FILE #_______ PLANNING/ZONING DEPARTMENT APPLICATION FEE: \$______

E-MAIL: vllgzoning@elkrapids.org

Zoning Amendment Request Requirements

Applications for a Zoning Amendment Request must be received twenty-five (25) days prior to the date of the Planning Commission meeting to be placed on the agenda. You or your representative should be present at the meeting to explain your request and to answer any questions.

The Planning Commission shall schedule a public hearing following a determination by the Planning/Zoning Department that the application is complete after which the Planning Commission will make a recommendation to the Village Council. Two readings are required for Zoning Amendments to be scheduled by the Village Council at which time the Council will consider final action on the request.

Regular meetings of the Planning Commission are held on the fourth Tuesday of each month at 7:00 p.m. at the Elk Rapids Community Governmental Center. Regular meetings of the Village Council are held on the first and third Monday of each month at 7:00 p.m.

Applicant Information

Name, Address, Phone # and E-mail Address of Owner:

Name, Address, Phone # and E-mail Address of Agent (if applicable):

1 Rev. 12/2015



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Action Requested

Text Amendment:

Identify Chapter, Article, and/or Section of the Village of Elk Rapids Zoning Code requested for amendment. Attach copy of proposed ordinance language.

Re-zonir	ng:			
Rezone Parcel #		from	to	for the following purposes:
		Propert	y Information	
Address:				Parcel #:
This parcel is	platted,	un-platted,	located wit	hin the T.I.F.A.
Present use of th	ne property:			
Name, Address, equitable interes	-		of all persons,	firms or corporations having a legal of

Site Plan Requirements

Attach a site plan or registered land survey showing all existing structures on the property, all proposed structures and marking those structures that will be removed. Also, the general shape, size and location of all existing structures within 100 feet of the property along with their uses shall be depicted on the site plan, along with all abutting roads, streets, alleys, or easements.



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Statement of Justification for Requested Action

State specifically the reason for this rezoning request at this time. Include why, in the opinion of the Applicant, the rezoning requested is consistent with the Master Plan and why such a rezoning is consistent with adjacent zoning districts and land uses:

If the proposed rezoning does not conform to the Master Plan or adjacent zoning district and land uses, explain what specific changes or changing conditions in the immediate area make the rezoning necessary to the promotion of public health, safety, and welfare, and if approved, will not be detrimental to the property of other persons located in the vicinity. Attach any supporting documentation which substantiates your claim.

Certification and Affidavit

The undersigned affirm(s) that he/she/they is/are the	Owner	Owners	Representative
involved in the petition and that the answers and sta			
submitted are in all respects true and correct to the bes			
making this application, the undersigned grants all offi			•
Rapids access to the subject property as required a support of a determination as to Zoning Code complian		te to assess	site conditions in
Signature:	Date:		
Signature:	Date:		

NOTICE TO APPLICANT

Public hearing notices regarding rezoning requests will be sent to residents and property owners within 300 feet of the site involved in the request and notices will be posted on the Village of Elk Rapids website and published in the newspaper of record. The opinions and concerns of residents and adjacent property owners are taken into consideration by the Planning Commission and the Village Council in the course of the public hearing.



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FOR VILLAGE USE ONLY

FILE NUMBER:	FEE TENDERED:		
	CASH CHECK#		
REQUEST FOR ZONING AMENDMENT:			
APPROVED			
DENIED			
AUTHORIZED SIGNATURE:			
	DATE:		
Planning and Zoning Administrator			