

File #: _____

Date Submitted: _____

**CHARTER TOWNSHIP OF LYON
APPLICATION FOR AMENDMENT TO THE ZONING MAP (REZONING)**

NOTICE TO APPLICANT: Applications to amend the Zoning Map must be submitted to the Township *in substantially complete form* at least twenty-eight (28) days prior to the Planning Commission's meeting at which the proposal will be considered. Petitions for rezoning of a specific site shall be accompanied by a plot plan or survey in accordance with the requirements of Section 9.02 of the Ordinance, plus the required fees. All meetings are held at the Lyon Township Hall, 58000 Grand River Avenue, New Hudson, Michigan, 48165. Phone number: 248-437-2240. Fax number: 248-437-2336.

TO BE COMPLETED BY APPLICANT:

I (We), the undersigned, do hereby respectfully request an amendment to the Zoning Map and provide the following information to assist in the review:

Applicant: _____

Mailing Address: _____

Telephone: _____ Fax: _____

Email: _____

Applicant's Legal Interest in Property: _____

LOCATION OF PROPERTY:

Street Address: _____

Nearest Cross Streets: _____

Sidwell Number: _____

PROPERTY DESCRIPTION:

If all or part is a recorded plat, provide lot numbers and subdivision name. If all or part is a condominium, provide unit numbers and condominium name. If all or part of the property is not part of a recorded plat (i.e., "acreage parcel"), provide metes and bounds description. Attach separate sheets, if necessary.

Property Size (Square Feet): _____ (Acres): _____

EXISTING ZONING (please check):

- | | |
|--|--|
| <input type="checkbox"/> R-1.0 Residential – Agricultural District | <input type="checkbox"/> B-2 Community Business District |
| <input type="checkbox"/> R-0.5 Single Family Residential District | <input type="checkbox"/> B-3 General Business District |
| <input type="checkbox"/> R-0.3 Single Family Residential District | <input type="checkbox"/> NH New Hudson Business District |
| <input type="checkbox"/> RM-1 Suburban Township District | <input type="checkbox"/> Core |
| <input type="checkbox"/> RM-2 Multiple Family Residential District | <input type="checkbox"/> Edge |
| <input type="checkbox"/> MHP Mobile Home Park District | <input type="checkbox"/> Neighborhood |
| <input type="checkbox"/> PD Planned Development District | <input type="checkbox"/> I-1 Light Industrial District |
| <input type="checkbox"/> MU Mixed Use District | <input type="checkbox"/> I-2 General Industrial District |
| <input type="checkbox"/> CJ Consent Judgment | <input type="checkbox"/> RO Research Office |
| <input type="checkbox"/> P-1 Vehicular Parking District | <input type="checkbox"/> O-1 Office District |

Requested Zoning: _____

Proposed Use of Property: _____

Proposed Buildings to be constructed (if known at this time): _____

Can the building be constructed without variances under the proposed zoning? ____ Yes ____ No

If no, describe anticipated variances: _____

JUSTIFICATION FOR PROPOSED REZONING

Please complete the following questions, with sufficiently detailed explanation, to provide information needed to evaluate your rezoning proposal (attach additional sheets, if necessary):

1. Is the proposed rezoning consistent with the Township Master Plan, and, in particular, the Future Land Use Map?

2. Have conditions changed since the Zoning Ordinance was adopted? Why do you believe the existing zoning is no longer appropriate?

3. Is the proposed rezoning consistent with the zoning classification of surrounding parcels?
4. Are the site's physical, hydrological, and environmental features suitable for the range of uses permitted in the requested zoning district?
5. Could all of the requirements for the proposed zoning classification be complied with on the subject parcel?
6. Is the proposed zoning consistent with the trends in land use in the general vicinity?
7. Would the uses permitted in the proposed zoning district be compatible with surrounding uses and zoning in terms of views, noise, air quality, traffic, density, the environment, drainage, and land values?
8. Does the public infrastructure (streets and roads, water system, wastewater treatment and sanitary sewers and drainage) have capacity to accommodate the uses permitted in the proposed zoning district?
9. If a specific use is desired on the subject parcel, are there any other zoning districts in the Township that could accommodate the use?
10. State any other circumstances or reasons in support of the proposed rezoning.

SUBMIT THE FOLLOWING:

1. Six (6) copies of a plot plan or survey of the specific site. Include zoning designations of adjacent parcels.
2. A PDF file of the plot plan or survey.
3. Proof of property ownership (title insurance policy or registered deed with County stamp).

PLEASE NOTE: Once a public hearing is scheduled, it is the applicant's responsibility to install rezoning signage on the parcel involved, as described in an attachment to this application.

The applicant, or a designated representative, **MUST BE PRESENT** at all scheduled meetings, or the rezoning proposal may be tabled due to lack of representation.

APPLICANT'S ENDORSEMENT:

All information contained herein is true and accurate to the best of my knowledge. I acknowledge that the Planning Commission will not review my application unless all information in this application and the Zoning Ordinance has been submitted. I further acknowledge that the Township and its employees shall not be held liable for any claims that may arise as a result of acceptance, processing, or approval of this site plan application.

Additionally, I hereby authorize the employees and representatives of Lyon Township to enter upon and conduct an inspection and investigation of the above-referenced property.

Signature of Applicant

Date

Applicant Name (Print)

Signature of Applicant

Date

Applicant Name (Print)

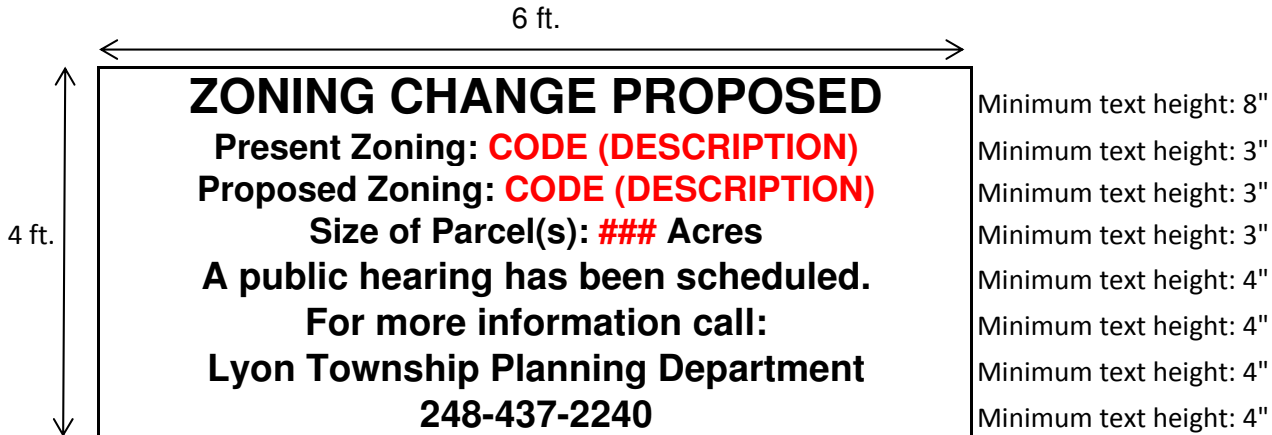
Signature of Property Owner Authorizing this Application

Date

Property Owner Name (Print)

| | | |
|--|-----------------|---------------|
| TO BE COMPLETED BY THE TOWNSHIP | | Case #: _____ |
| Date Submitted: _____ | Fee Paid: _____ | |
| Received By: _____ | | |

Rezoning Sign Requirements



Other Requirements

1. Sign must have black letters on a white background.
2. Sign facing must be exterior plywood, aluminum, or similar material.
3. Sign support system must be structurally sound.

A Temporary Sign Permit application must be submitted to the Building Department along with:

1. Temporary Sign Permit application fee (\$35)
2. A layout of the sign, which shows that the above requirements will be met.
3. An aerial showing the approximate location of the sign(s).

If you need assistance with any of these items, please contact the Planning Department: 248-437-2240