

PETITION FOR ZONING CHANGE

Application Number: _____

Joyfield Township, Benzie County, MI

PO Box 256, Benzonia, MI 49616

Planning Commission Chair: Betsy Evans, joyfieldpc.betsy@gmail.com, 231.383.2798

Township Clerk: Dodie Putney, joyfield.township.clerk@gmail.com, 231.649.0614

PURPOSE OF REQUEST

- ☐ Zoning Map Amendment / Rezoning
- ☐ Conditional Rezoning
- ☐ Zoning Ordinance Text Amendment

PROPERTY OWNER INFORMATION

Name: _____ Phone: _____ Email Address: _____

Mailing Address: _____ City _____ State _____ Zip _____

APPLICANT INFORMATION

Name: _____ Phone: _____ Email Address: _____

Mailing Address: _____ City _____ State _____ Zip _____

PROPERTY INFORMATION

Parcel number: _____ Property address: _____

Current Zoning District:

- | | |
|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Rural | <input type="checkbox"/> Zone A |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Zone B |
| | <input type="checkbox"/> Zone C |
| | <input type="checkbox"/> Zone D |

Proposed Zoning District: _____

Deed Restrictions (attach documents as necessary): _____

Explain why the present zoning classification is inadequate: _____

If a Conditional Rezoning request is desired, the applicant shall establish conditions for the rezoning as a part of the application. Such conditions shall:

- ☐ Be in a form recordable with the Register of Deeds with a legal description of the property, acknowledging the conditions run with the land
- ☐ Incorporate any documents submitted that are necessary to illustrate the implementation of the Statement of Conditions
- ☐ Contain the notarized signatures of all of the owners of the subject land preceded by a statement attesting to the fact that they voluntarily offer and consent to the provisions contained within the Statement of Conditions

AFFIDAVIT

I (we) the undersigned affirm that the foregoing answers, statements and information are in all respects true and correct to the best of my (our) knowledge and belief.

Signature: _____ Date: _____

BELOW FOR TOWNSHIP USE ONLY

Date received: _____

Completed Application:

☐ Yes

☐ No

Fee Paid: _____

Public Hearing Date: _____

Date of advertising: _____

Township Board Review Date: _____

Notes: