



City of Grosse Pointe Park

Zoning Board of Appeals Application

The filing of this application will facilitate an applicant appearing before the Zoning Board of Appeals for requesting a variance to the City of Grosse Pointe Park's Zoning Ordinance and/or other ordinances. Incomplete application forms will not be accepted. Zoning Board of Appeals requires notification of all property owners within 300' of the property. Applicant will be notified as to when the Appeals meeting is scheduled. The City charges a non-refundable fee of \$750.00 PLUS Calculated Escrow for each Zoning Board of Appeals application. This fee pays for the cost of professional review of your request and notification to property owners. The hearing date will be determined by the City Manager and City Clerk. All mailings will be sent to the applicant as listed on this form. The applicant, or representative, must be present at the Zoning Board of Appeals meeting when the appeal is discussed. Failure of the applicant or their authorized agent to appear before the Board as scheduled may be construed as justification for dismissal of the case without prejudice and with no refund of appeal fee.

APPLICANT NAME

ADDRESS

PHONE

Contact Email:

OWNER OF PREMISES

ADDRESS

PHONE

Check One:

☐ Variance Request ☐ Ordinance or Map Interpretation ☐ Appeal of Administrative Decision

1. The property is located at (address) _____

2. Property Tax ID: _____

3. Legal Description (Attach if Necessary):

4. Zoning Designation of Property: _____

5. Current use of Property: (circle one) Commercial / Industrial / Vacant / Residential / Multi-Family

6. DESCRIBE THE PARTICULAR NATURE OF THE VARIANCE SOUGHT AND/OR INTERPRETATION URGED BY THE APPLICANT (attach additional sheets if necessary):

7. VARIANCE REQUEST: *(To Be Completed Only with Respect to Variance Requests. Skip to Item 8 for Interpretation and Administrative Decision Appeals):*

With regard to the above appeal, I (we) make the following declaration:

Special conditions and circumstances DO EXIST, which are peculiar to the land, structure, or building involved and which are not applicable to other lands, structures, or buildings in the same district. These conditions and/or circumstances are:

To not grant a variance and interpret the provisions of the Code would deprive this applicant of the following rights commonly enjoyed by other properties in the same zoning area or district under the terms of the Code:

Granting the variance requested will be in harmony with the general purposes and intent of the Code and will not be detrimental to the neighborhood or otherwise detrimental to the public welfare because of the following specific fact(s):

8. INTERPRETATION / ADMINISTRATIVE DECISION APPEAL: *(To Be Completed Only with Regard To Interpretation / Administrative Decision Appeals):* The Zoning Code interpretation OR decision as made by the Grosse Pointe Park Building Inspector/Zoning Administrator that is appealed as incorrect or otherwise in error, and the applicant's basis for the interpretation urged is as follows:

Appeal Guidelines

The following guidelines will be considered in determining the validity of each variance request:

- The proposed variance involves practical difficulties.
- The proposed variance involves exceptional and unique circumstances.
- The proposed variance will not impair the adequate supply of light and air to adjacent property owners nor increase the congestion in public streets.
- The proposed variance will not increase the hazard of fire or flooding nor endanger public safety.
- The proposed variance will not unreasonably diminish or impair established property values within the surrounding area.
- The proposed variance will not impair public health, safety, comfort, standards, or welfare of the inhabitants of The City.
- The proposed variance will not alter the essential character of the neighborhood.
- The spirit of the Ordinance must be observed.

REQUIRED TO PROVIDE

- ☐ 7 sets of a complete ZBA Application form. One with original signature
- ☐ 7 sets of a complete Notice of On-Site Inspection form. One with original signature IF REQUIRED
- ☐ 7 copies of a clear sketch must accompany this application. This sketch must be a minimum of 8 1/2" X 11" and must show the property dimensions, all buildings presently existing or proposed on the site, the size of all yard areas, all structures within 50 feet of the property, the location and size of any other important property characteristics such as easements, septic fields, flood plains, etc. You may use graph sheet included in this application or supply your own. **APPLICATIONS WITHOUT A SKETCH CANNOT BE ACCEPTED**
- ☐ **A COPY OF THE REJECTION** FROM THE CITY ENFORCING OFFICIAL MUST BE PRESENTED WITH THIS APPEAL.

FEES NON-REFUNDABLE FEES DUE WITH APPLICATION

\$750 + Additional Planner and or Legal Review Escrow Fee as Required

FEE INCLUDES ONE ZBA REVIEW AND PUBLIC HEARING

APPLICANT AFFIDAVIT**NOTE IF APPLICANT IS NOT THE OWNER: OWNER'S AFFADAVIT MUST ALSO BE PROVIDED**

The aforementioned information is true to the best of my knowledge.

Applicant's Signature_____
Printed Name_____
Date

COUNTY OF WAYNE

STATE OF MICHIGAN

SS

The undersigned, being duly sworn, deposes and says that the forgoing statements and answers herein contained and accompanied information and data are in all respects true and correct to the best of their knowledge and belief.

Owner or Agent

Subscribed and sworn to before me this _____ day of _____

Notary Public, Wayne County, Michigan

My commission expires _____

Any decisions of the Board favorable to the applicant will remain valid for one year or only as long as the information or data relating thereto are found to be correct and the conditions upon which the resolution was based are maintained.

City Use Only:

Property Address: _____

File Number: _____

Receipt Number: _____

Date Received: _____

Agenda No.: _____

Scheduled to be heard on date: _____

Application Reviewed by: _____

Fee Paid: _____

NOTES: _____

DISPOSITION



NOTICE OF "ON-SITE" INSPECTION

Name of Applicant _____

Telephone (Home) (Work/Other): _____

Email Address (Personal) (Work/Other): _____

Current Address _____

Address of site to be inspected: _____

Near Crossroads: _____ and _____

According to your application, members of the Z.B.A. and / or City Staff or Consultants will inspect the following:

☐ LOT LINES ☐ ACCESSORY BUILDING(S)

☐ DECK(S) ☐ ADDITION(S)

☐ ROADWAY ☐ HOUSE

☐ OTHER: _____

Your property must be staked to show the proper location of your variance request at least two weeks prior to the Zoning Board of Appeals hearing. Make certain the measurements on the application are accurate!

- All perimeters, corners, and other necessary reference points of proposed project must be clearly staked
- Stakes must be at least 2 feet in height
- Stakes must be of substantial material and conspicuously marked
- Stakes are to remain in place until your appeal application has been processed

By signing this document, you are giving permission to the members of the City of Grosse Pointe Park Zoning Board of Appeals and any necessary City Employees or Consultants, to make on-site inspections on your property for this variance request.

This form must be signed by the Applicant or a legal representative. The appeal will be postponed until complete.

Signature of Applicant: _____ Dated: _____

CITY OF GROSSE POINTE PARK

AFFIDAVIT OF OWNERSHIP

STATE OF MICHIGAN)
) ss.
COUNTY OF WAYNE)

The undersigned, being duly sworn, deposes and states:

1. That, pursuant to the vesting deed recorded on _____, in Liber _____, Liber Page No. _____, WAYNE County Records, the undersigned is the record title owner ("Owner") of the real property located in the City of Grosse Pointe Park, County of Wayne, State of Michigan, commonly known as: _____, Tax Parcel ID No. _____.
2. That on _____, a copy of the vesting deed was provided to the City of Grosse Pointe Park.
3. That the individual(s) executing this Affidavit warrant that they are duly authorized and fully empowered to execute this Affidavit on behalf of the undersigned.

IN WITNESS WHEREOF, the undersigned Owner has executed this Affidavit on the _____ day of _____, 20____.

OWNER:

Name: _____

Name: _____

ACKNOWLEDGMENT

The foregoing instrument was acknowledged, sworn to and subscribed before me this _____ day of _____, 20____, by _____, known to me to be the person(s) who executed the within instrument and who acknowledged the same to be their free act and deed.

Printed Name: _____, Notary Public
State of Michigan, County of _____
My Commission Expires: _____
Acting in the County of _____