Village of Sand Lake

* 2 E. Maple Street* PO Box 139 Sand Lake, MI 49343 * Phone: (616)636-8854 * Fax: (616)636-4564 * www.villageofsandlake.org *

Variance Application

Applicant: _____

Applicant Address: _____

City: _____ State: _____ **Zip code:** _____

Phone: _____

Property Address: _____

Parcel Number 41-03-_____

Zoning Ordinance Section(s) Appealed: _____

Nature of Appeal (The Zoning Ordinance (requires/allows/does not permit):

_____

_____

Required accompanying material: A complete application form supplied by the Zoning Administrator (this form). A site plan, as specified in Chapter 1*S,* Site Plan Review. A statement with regard to compliance with the criteria required for granting a variance in Section 17.06, and other criteria imposed by this Ordinance affecting the variance under consideration.

_____

A statement, with regard to compliance, with the criteria required for approval in section 17.06, and other criteria imposed by this ordinance affecting the variance under consideration.

Describe how the proposed land use will satisfy each of the following criteria:

The literal enforcement of the requirements of this Ordinance would involve practical difficulties or cause unnecessary hardship:

That special conditions or circumstances exist which are peculiar to the land, structure or building involved and which are not applicable to other lands, structures of buildings in the same district;

That literal interpretation of the provisions of this ordinance would deprive the applicant of property rights commonly enjoyed by other properties in the same district under the terms of this Ordinance;

That the special conditions or circumstances do not result from the actions of the applicant;

That the authorizing of such variance will not be of substantial detriment to neighboring properties and will not be contrary to the spirit and purpose of this Ordinance.

No nonconforming use of neighboring lands, structures of buildings shall in itself be considered grounds for the issuance of a variance.

Village office use only
Date received: _____ $250 Fee Received: _____

Zoning Administrator Decision:

Complete Date: _____
Incomplete Date: _____

Zoning Board of Appeal Decision:

Approved Date: _____
Denied Date: _____
Approved, with conditions, date: _____
Conditions:_____
_____

Zoning Administrator Signature: _____ Date: _____
Date fee returned (if denied) _____