

# **Town of Grand Rapids**

Zoning Appeal/Variance Application

### Application Fee: \$200

#### FOR OFFICE USE ONLY

Date Received:	Date Paid:	Parcel #		Permit #:			
APPLICANT INFORMATION							
Name: Address		S:					
Phone Number: Secondary Phone		Number:	En	nail Address:			
PROPERTY INFORMATION							
Owner Name:		Owner Address:					

Owner Name:		Owner Add	ress:		
Owner Phone Number:	Secondary Phone:		Owner Email Address:		
Legal Description:			Parcel Size (acres or Sq Ft):		Zoning District:

# **Type of Variance Requesting:**

Use variance- permits a landowner to put a property to an otherwise prohibited use

Area variance- provides an increment of relief (normally small) from a physical dimensional restriction such as building height or setback.

# Reason why variance is requested: \_\_\_\_\_\_

Ordinance Section from which the variance is being sought: \_\_\_\_\_

#### Alternatives

Describe alternatives to your proposal, including other locations, designs, and construction techniques. Please attach a site map illustrating the alternatives considered in each category below:

1. **Compliant Alternatives:** Alternatives considered that adhere to existing standards. If a compliant alternative is selected, a regular permit can be obtained. If compliant alternatives are rejected, provide the reasons for their rejection.

2. Lesser Variance Alternatives: Alternatives considered that require a lesser variance, along with the reasons for their rejection.

Applicant herby grants permission to the Zoning Administrator and Board of Appeals members, as individuals, or as a quorum to visit the property in order gather evidence to aid in their decision. Applicant must be represented at the Appeals meeting at which the permit is considered. Applicant is required to provide all the needed information, including any survey, plot plan, photos, building plans, easements, street locations, parking, loading or driveways, access restrictions, setbacks, adjacent properties, structures and uses, fencing/screening, type of construction, construction commencement/completion dates, septic systems, well, drainage, hours of operation, traffic generation, and any other information needed by the Board to act upon the request.

Applicant must be present at the Zoning Appeals Board hearing at which the permit is considered.

Applicant (Sign):	Print:	Date:
FOR OFFICE USE ONLY		
Zoning Appeals Hearing Date:	Approved	Denied
Conditions:		
NOTE: If not started in (6) six months, vari	iance becomes void.	