

CRYSTAL FALLS TOWNSHIP
ZONING BOARD OF APPEALS
DEMAND FOR APPEAL/VARIANCE

Revised 1-1-25

Application Fee \$500

(applicant: person filing the appeal)

(address)

(city, state, zip code)

(____) ____ - ____
(____) ____ - ____
(telephone, home and business)

OFFICE USE ONLY

Case number _____

Date Rec'd _____

Fee Rec'd _____

Receipt # _____

Hearing date _____

Action: _____

Date: _____

Expiration Date: _____

Applicant's standing (interest) in the appeal (check one):

*Property owner

*Contractor/Builder

*Authorized Agent (attach written permission statement from Property Owner)

*Other: Explain: _____

PROPERTY OWNER'S (OF LAND SUBJECT TO APPEAL) NAME AND ADDRESS
(if not the applicant)

Phone (____) ____ - ____

ADDRESS/ LOCATION OF LAND SUBJECT TO APPEAL: _____

PARCEL DATA PROCESS (tax) NUMBER FOR LAND SUBJECT TO APPEAL:

36 - 002 - ____ - ____ - ____

PARCEL SIZE SUBJECT TO APPEAL: _____

ZONING DISTRICT OF PROPERTY SUBJECT TO APPEAL:

PROPERTY DESCRIPTION FOR LAND SUBJECT TO APPEAL: _____

ACTION REQUESTED: (check one)

*To interpret a particular section of the ordinance, as it is felt the Zoning Administrator/Planning Commission is not using the proper interpretation:

The Section is: _____

*To interpret the zoning map, as it is felt the Zoning Administrator/Planning Commission is not reading the map properly. Describe the portion of the zoning map in question (attach detail maps if applicable): _____

*To grant a non-use variance to certain requirements of the zoning ordinance, (parking, setbacks, lot size, height, floor area, sign regulations, location of accessory buildings, maximum amount of lot coverage, etc.). Specify the section and specific regulations a variance is being sought from: _____

*To overturn an action of the zoning administrator. The zoning administrator erred (did not issue a permit, issued a permit, enforcement): _____

RULING SOUGHT:

What is the sought ruling by the Crystal Falls Township Zoning Board of Appeals? _____

_____ (attach additional sheets if necessary)

STATEMENT OF JUSTIFICATION FOR REQUESTED ACTION

State specifically the reason for this demand for appeal request: _____

_____ (attach additional sheets if necessary)

*** ATTACH A DETAILED SITE PLAN THAT INDICATES SPECIFIC DIMENSIONS OF THE PROPOSED BUILDING/STRUCTURE/ADDITION/ENLARGEMENT/PROPOSED CONSTRUCTION WORK (LENGTH, WIDTH, HEIGHT, ETC). ALSO INCLUDE REFERENCE DISTANCES TO OTHER BUILDINGS/STRUCTURES ON THE PROPERTY & REFERENCE DISTANCES FROM THE PROPOSED BUILDING/STRUCTURE/PROPOSED CONSTRUCTION WORK TO ALL SURROUNDING PROPERTY LINES.**

*Attach a copy of the initial application concerning this issue and the zoning administrator's (or planning commission's) written ruling on this issue (if applicable).

NON-USE VARIANCE QUESTIONS:

If you are seeking a variance, provide answers to the following questions. Please number the answers the same as they are numbered here. Please be specific and explain your answers. (attach additional sheets if necessary)

Non-use Variance: A non-use variance may be allowed by the Zoning Board of Appeals only in cases where there is evidence of practical difficulty in the official record of the hearing and that all of the following conditions are met:

1. Are there are exceptional or extraordinary circumstances or conditions applying to the property that do not apply generally to other properties in the same zoning district? Exceptional or extraordinary circumstances or conditions may include:

a) Exceptional narrowness, shallowness or shape of a specific property on the effective date of this Chapter or amendment.

b) By reason of exceptional topographic or environmental conditions or other extraordinary situation on the land, building or structure.

c) By reason of the use or development of the property immediately adjoining the property in question, including, but not limited to, pre-existing ingress and egress rights.

2. Is the variance necessary for the preservation and enjoyment of a substantial property right similar to that possessed by other properties in the same Zoning District and in the vicinity? **The possibility that compliance with this Ordinance may prove to be more expensive or otherwise inconvenient shall not be part of the consideration of the Board.**

3. Will the variance be detrimental to adjacent property and the surrounding neighborhood?

4. Will the variance materially impair the intent and purpose of this Ordinance or the provision from which the variance is requested?

5. Was the immediate practical difficulty causing the need for the variance request created by the applicant?

AFFIDAVIT: I agree the statements made above are true, and if found not to be true, any Zoning Board of Appeals ruling that may be issued may be void. Further I agree, any Zoning Board of Appeals ruling and subsequent permit that may be issued is with the understanding all applicable sections of the Crystal Falls Township Zoning Ordinance will be complied with. Also, I agree to notify the zoning administrator for Crystal Falls Township for inspection before the start of construction and when locations of proposed uses are marked on the ground. **Further, I agree to give permission for officials of Crystal Falls Township, the County of Iron and the State of Michigan to enter the property subject to this permit application for purposes of inspection & assessment.** Also I understand any zoning action by the Zoning Board of Appeals conveys only land use rights, and does not include any representation or conveyance of rights in any other statute, building code, deed restriction or other property rights.

Permit Applicant (Please Print): _____

Signature: _____

Date: _____

Send completed application with attachments, along with \$500.00 application fee, to:
Crystal Falls Township, Zoning Administrator, PO Box 329, Crystal Falls, Michigan 49920