

WRIGHT TOWNSHIP

Ottawa County
1565 – Jackson Street, P.O. Box 255, Marne, Michigan 49435

ZONING ORDINANCE MAP (REZONING) OR TEXT AMENDMENT APPLICATION

Instructions

For an application to be considered complete, ALL information must be provided. If an item is not applicable to your petition, please mark that item N/A for “not applicable” and provide an explanation why it is not applicable.

- **Review Body:** Planning Commission
- **Meeting Frequency:** Third Monday of every month
- **Application Deadline:** Forty-five (45) calendar days prior to the third Monday meeting at which you desire your application to be considered.
- **Township Office Review:** Following review by township personnel, if any required materials are deemed missing the applicant will be notified and must provide said material, which must result in a complete application prior to the required publication deadline for said meeting for consideration.

**DO NOT DISCARD THIS PAGE
YOU MUST SUBMIT THIS PAGE WITH YOUR APPLICATION**

For Office Use Only

Application #: _____
Parcel #: _____

Date(s) Advertised: _____

Fees Paid: _____
Escrow: _____

Date of Meeting: _____
Action Taken: _____

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1565 – Jackson Street, P.O. Box 255, Marne, Michigan 49435

Phone 616-677-3048 Fax 616-677-3046

REQUEST FOR ZONING ORDINANCE AMENDMENT

MAP AMENDMENT (REZONING) FEE: \$500.00 & ESCROW FEE: \$1,000.00*

TEXT AMENDMENT FEE: \$200.00 & ESCROW FEE: \$300.00

(*Applicant is responsible for additional engineering, attorney, planning consultant fees, etcetera. The unused balance will be refunded to the applicant. Any amount over the escrow fee will be billed to the applicant.)

CHECK THE APPLICABLE REQUEST

____ MAP AMENDMENT (REZONING)

____ TEXT AMENDMENT

Name of Applicant: _____

Address of Applicant: _____

Telephone: _____ Fax: _____

Email: _____ Acreage of Subject Property: _____

Address of Subject Property: _____

Parcel Number**: _____ Zoning District: _____

**Attach legal description of property

List the name, address, phone number and interest of every person who has a legal or an equitable interest in any property included in the special use permit application.

What is the applicant's interest in making this petition? _____

What is the nature and effect of the proposed amendment? _____

MAP AMENDMENT (REZONING)

What is the proposed zoning of any property requested to be rezoned? _____

Provide a scaled map of the property, fully-dimensioned and correlated with the legal description, showing the following:

1. The land which would be affected by the proposed amendment;
2. If the land proposed for rezoning does not include the entire parcel or lot, the land and legal description of the portion of the parcel of the lot which is proposed for rezoning and the portion of the parcel of the lot which is not proposed for rezoning;
3. The present zoning of the land proposed for rezoning;
4. The present zoning of all abutting lands; and
5. All public and private rights-of-way and easements bounding and intersecting the land proposed for rezoning.

ADDITIONAL INFORMATION

Please provide proof of ownership. If ownership is pending a purchase agreement that is conditional to the Map Amendment request, please provide proof of said agreement.

In the instance there is an alleged error in the Ordinance, which would be corrected by the proposed amendment, provide a detailed explanation of such alleged error and detailed reasons why the proposed amendment would correct the same:

State the changed or changing conditions in the area or in the Township that make the proposed amendment reasonably necessary to the promotion of the public health, safety and general welfare:

State all other circumstances, factors and reasons that the petitioner offers in support of the proposed amendment:

TEXT AMENDMENT

Provide the exact text you are proposing with Section numbers (or new section number if a new section is proposed). Separately, provide text that shows all proposed changes, which include deletions and/or additions.

^By signing this application I acknowledge that I am the legal owner, petitioner or agent and that I have the authority to apply and that I provide consent for township officials to access the property to accurately evaluate the request. If requested to do so, I will place stakes to indicate boundaries, building locations, etcetera.

^Signature of Applicant

Date

^Signature of Owner

Date