

VILLAGE OF MANCELONA

120 West State St

PO Box 648

Mancelona, MI 49659

Phone: (231) 587-8331 Fax: (231) 587-5730

PETITION TO AMEND THE ZONING ORDINANCE

Applicant: _____

Applicant Address: _____

Email: _____

Phone: _____

TEXT AMENDMENT: _____

MAP AMENDMENT: _____

Complete this section for TEXT AMENDMENT:

Section(s) to change (attached current language and proposed language)

Complete this section for MAP AMENDMENT (see Article 13, Section 13.1.3.D):

PARCEL # _____ **Property Address:** _____

Current Zoning district and use: _____

Proposed Zoning district and use: _____

Neighboring properties zoning district and use:

Include property owner authorization letter and signature.

I agree the statements made above are true, and if found not to be true, any Planning Commission ruling that may be issued may be void. Further agree, any Planning Commission ruling and subsequent permit that may be issued is with the understanding all applicable sections of the Village of Mancelona Zoning Ordinance will be complied with. Also, I agree to notify the Zoning Administrator for the Village of Mancelona 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 the Village of Mancelona to enter the property subject to the permit application for purposes of inspection. Also I understand that any Planning Commission action does not include any representation of conveyance of rights in any other statute, building code, deed restriction or other property rights.

Owner Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

For Village Use Only

Fee Paid: \$ _____ Date Received: _____ Received By: _____

Inspection Date: _____ Approved: _____ Denied: _____

Permit #: _____ Date Issued: _____ ZA signature: _____