VILLAGE OF MANCELONA

120 West State St PO Box 648

Mancelona, MI 49659

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

ZONING BOARD OF APPEALS APPLICATION

Property Owner: Property Address: Property Owner Address: Property Owner Phone:		Applicant: Applicant Address: Phone:		
Please explain request: (sub	mit plot plan as per section 11.	4.D)		
List any Zoning Ordinance se	ection(s) related to the request	:		
			ts in Section 11.8 of this ordinance IF it hat all the applicable standards have	
issued may be void. Further understanding all applicable sometify the Zoning Administrational locations of proposed uses a Mancelona to enter the proposed used action by the Board	er agree, any Appeals Board rusections of the Village of Mance stor for the Village of Mancelonare marked on the ground. Fullerty subject to the permit applic	uling and subsequent per elona Zoning Ordinance wi na for inspection before t rther, I agree to give pern cation for purposes of insp nd use rights, and does	Board of Appeals ruling that may be mit that may be issued is with the ill be complied with. Also, I agree to the start of construction and when nission for officials of the Village of pection. Also I understand that any not include any representation or erty rights.	
Owner Signature:			Date:	
Applicant Signature:			Date:	
		U - Ok-	1	
		ge Use Only		
Fee Paid: \$	Date Received	d: Re	eceived By:	
Inspection Date:	Approved:	Denied:		
Permit #· Date	e Issued· ZA S	signature:		