

**APPLICATION FOR ZONING CHANGE**

(Submit TWELVE Copies to the Township Clerk)

To the Township Board and Planning Commission of the  
Township of Milan, Monroe County, Michigan.

I (We), the undersigned, do hereby respectfully make application to and petition the Township Board to amend the Township Zoning Ordinance and change the zoning map of the Township as hereinafter requested, and in support of this application, the following facts are shown:

1. The property sought to be affected by the zoning change request is located and described as follows:

Located at: \_\_\_\_\_  
(Road or Street Location) (Section Number)

Current Zoning: \_\_\_\_\_  
(Lot Number)

Dimensions: \_\_\_\_\_ Frontage: \_\_\_\_\_  
(Width & Length in feet)

Size of property: \_\_\_\_\_ acres Frontage: \_\_\_\_\_  
(feet) (On what Road)

Legal Description: \_\_\_\_\_  
(Attach copy of legal description if more space is needed.)

Attach a dimensioned plot plan of the above property prepared by registered engineer, surveyor or owner)

2. The property sought to be affected by the zoning change request is owned by:

Name of Land Owner: \_\_\_\_\_

Address of Land Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

3. If applicant IS NOT the owner of the property, state the basis of your interest: \_\_\_\_\_  
(e.g. legal representative, etc)

Name of Individual or Firm: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

4. It is requested that the foregoing property be rezoned: From: \_\_\_\_\_ To: \_\_\_\_\_

5. Proposed use of land, if the zoning change request is approved: \_\_\_\_\_  
(Attach plot plan, including location of all buildings, existing or new)

6. Will conditions relating to the use and/or development of the parcel be offered? Yes / No. If yes, attach the proposed conditions. Refer to Article 12 of the Milan Township Zoning Ordinance for details.

7. The applicant may be required to furnish other information as requested by the Board. You may include any additional information that you believe will be of assistance in reaching a decision.

Application Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

\_\_\_\_\_  
(Filing fee) (Check Number)

**APPLICATION INSTRUCTIONS**

Applications or petitions to the Township for amendment involving reclassification of property shall be in writing signed by the fee holder owner(s) of the property proposed for rezoning, and accompanied by a legal description and a dimensioned plot plan of the property concerned, and a statement of the proposed use. The application or petition shall be accompanied by a filing fee in an amount as established by the Township Board by its own resolution. The fee shall be paid over to the Township Clerk and shall be deposited in the General Fund of the Township. Reference Milan Township Zoning Ordinance Article 17.11 and/or Article 12 for details.

**ZONING CHANGE**  
**Planning Commission Recommendation**

The Milan Township Planning Commission held a public hearing on \_\_\_\_\_  
to receive public comment on the above zoning change request to modify Milan  
Township Zoning Map.

Whereas

Whereas

Whereas

Whereas

Therefore, following the above public hearing, the Milan Township Planning  
Commission reviewed the above zoning change request. A motion was made by  
\_\_\_\_\_ to recommend that the Milan Township Board approve the  
above zoning change request for the property listed in section 1. Planning Commission  
member \_\_\_\_\_ seconded the motion.

The motion recommending that the Milan Township Board approve the above zoning  
change request for the property listed in section 1, was **approved** / rejected by a vote of  
\_\_\_ for and \_\_\_ against.

A copy of the meeting minutes, Township Application for Special Use Approval form and any other relevant documents will be  
forwarded to the Milan Township Board for their consideration.

**TOWNSHIP BOARD DECISION**

On \_\_\_\_\_, the Milan Township Board has considered the Planning Commission's recommendation to approve the above zoning request. A motion was made by \_\_\_\_\_ to recommend that the Milan Township Board approve the above zoning change request for the property located at \_\_\_\_\_.

Township Board member \_\_\_\_\_ seconded the motion.

The motion, by the Milan Township Board, to approve the above zoning change request at the above mentioned property, was **approved** / denied by a vote of \_\_\_ for and \_\_\_ against.

The above zoning change shall become effective seven (7) days after publication in a local newspaper.

I, Stephanie Kozar, do hereby certify that I am the duly elected and acting Township Clerk of the Township of Milan, and I do hereby certify that this Zoning change request was approved by the Township Board of the Township of Milan, Monroe County, Michigan, at the regular meeting of the Township Board at the Milan Township Hall, Milan, Michigan, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

THE TOWNSHIP BOARD, MILAN TOWNSHIP,  
COUNTY OF MONROE, STATE OF MICHIGAN

By: \_\_\_\_\_  
Stephanie Kozar, Milan Township Clerk

AUTHENTICATED:

\_\_\_\_\_  
Mark Bogi, Milan Township Supervisor