

NAME: _____ CASE NUMBER: _____

VARIANCE REQUEST APPLICATION

1. Zoning district _____

2. Describe the reason(s) for requesting a variance from zoning ordinance requirements: _____

3. Describe the practical difficulty why ordinance requirements cannot be met: _____

4. Describe why the problem is not self-created: _____

5. Describe any negative impact to the adjacent parcel(s) that may result from the granting of the variance: _____

6. Describe why this variance is the minimum request that will make possible the reasonable use of the land, building, or structure: _____

Additional comments or statements: _____

THE ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE: _____ SIGNATURE: _____

Fee Paid: _____ Date: _____ Cash/Check# _____

ACKNOWLEDGED BY: _____ TITLE: _____

ELY TOWNSHIP
1555 Co Rd 496
Ishpeming, MI 49849

(906) 486-6802
zoning@elytwp.com