

**Columbia Township Board of Appeals**

**Request for Variance**

**\*\*All requirements must be met upon applying for this variance or the Zoning Board of Appeals may deny your request. Please initial all paragraphs to show compliance.**

**Property  
Owners  
Initials**

**Requirements when applying for a variance:**

1. If the variance request is for property in the Lake Columbia Property Owners Association Subdivision, the applicant must demonstrate they have submitted their request to the Association Building Control Committee for approval or denial.  
\_\_\_\_\_
2. Submit a drawing showing a plan view of all existing building(s) on the property including all dimensions of the building(s) and all lot lines. (Show all building(s) including septic tanks, drain field and water wells, etc).  
\_\_\_\_\_
3. Submit a second drawing showing those changes, which require a variance, including all dimensions of the changes and the relationship to the lot lines. Please make both drawings to the same scale. (No bigger than 11" X 14")  
\_\_\_\_\_
4. As an alternative, the proposed changes may be superimposed on a single drawing as long as the drawing is not complicated. Changes must be shown in dotted lines.  
\_\_\_\_\_
5. Staking the four (4) corners of the property lines must identify all physical property lines. All proposed changes must be identified by staking lines between all points.  
\_\_\_\_\_
6. If property lines cannot be easily identified, the property owner shall be required to submit a boundary survey showing all points. The property must be staked out reflecting the boundary survey.  
\_\_\_\_\_
7. Applicant must demonstrate that the Jackson County Health Department has been consulted and that their recommendation shall be considered part of the request for the variance.  
\_\_\_\_\_
8. Application must be signed by the owner of record or his/her agent or person(s) having equity in the property.  
\_\_\_\_\_
9. Each variance granted under the provision of this Ordinance shall become null and void unless:  
\_\_\_\_\_
  - a. The construction authorized by such variance or permit has been commenced within one hundred and eight (180) days after the granting of such variance and pursued diligently to completion; or
10. No application for a variance which has been denied wholly or in part by the Zoning Board of appeals shall be resubmitted for a period of three hundred and sixty-five (365) days from such denial, except on grounds of new evidence or proof of changed conditions found by the Zoning Board of Appeals to be valid.  
\_\_\_\_\_
11. No changes to the request will be allowed once the meeting has been scheduled.  
\_\_\_\_\_

To the Columbia Township Zoning Board of Appeals  
8500 Jefferson Road  
Brooklyn, MI 49230

APPLICATION FOR VARIANCE

I would like to apply for a variance as follows:

N/E/S/W Side yard setback variance of \_\_\_\_\_ feet. A distance of \_\_\_\_\_ feet to lot line.

N/E/S/W Side yard setback variance of \_\_\_\_\_ feet. A distance of \_\_\_\_\_ feet to lot line.

Front yard (Roadside) set back variance of \_\_\_\_\_ feet. A distance of \_\_\_\_\_ feet to lot line.

Back yard (Lakefront or Suburban) set back variance of \_\_\_\_\_ feet. Distance of \_\_\_\_\_ feet to back lot line.

To erect a \_\_\_\_\_ on property known as \_\_\_\_\_  
# of stories and type of building Lot #, subdivision or parcel

ADP # \_\_\_\_\_ and Street Address \_\_\_\_\_

Lot Size \_\_\_\_\_ square feet. Lot coverage \_\_\_\_\_ square feet.  
Currently (may not exceed 30%)  
Proposed

I (we) the undersigned are the property owner(s) or authorized representative(s) of the owners of the property described in this variance application and grant permission to the members of the Columbia Township Zoning Board of Appeals to enter the above-described property to inspect the layout of the variance request.

ATTACHED IS A PLOT PLAN SHOWING THE LOT SIZE, THE EXISTING BUILDING(S), THE PROPOSED CONSTRUCTION AND THE SETBACKS.

Fee: \$350.00 (effective 3-08) signed \_\_\_\_\_  
Paid: Address \_\_\_\_\_

Telephone: \_\_\_\_\_

\*\*\*\*\*

1. Certified letter sent/delivered \_\_\_\_\_ reply received \_\_\_\_\_.

2. Meeting scheduled for \_\_\_\_\_ time \_\_\_\_\_.  
Meeting location \_\_\_\_\_.

3. Decision of Zoning Board of Appeals. \_\_\_\_\_ the request.  
Approved/Deny

Signed \_\_\_\_\_  
Secretary, Zoning Board of Appeals