

City of Perry 203 W. Polly St., Perry, MI 48872

Ph: (517) 625-6155 Fax: (517) 625-6157 www.perry.mi.us

ZONING BOARD OF APPEALS REQUEST FOR VARIANCE

1.	Identification									
	Project Name									
	Applicant Name									
	Address									
	City/State/Zip									
	Phone									
	Email Address									
	Interest in the	Property (e.g. owner, p	ourchaser, etc.)							
	Property Owner (if	other than applicant)								
	Address									
	City/State/Zip									
	Phone									
	Email Address	3								
_										
2.	Property inform	Property Information								
	Property Street Add	ress								
	Permanent Parcel N	lumber								
	Legal Description of	Property								
	Zoning District									
	Area	Width	า	Depth						
	Current Use(s)									
	North	South	East	West						

North	South	East	West
. 5			
riance Requ Section of Ord	est linance from which varia	unces are requested	
	er/Section	Requirement	Proposed
•			
Type of varian	co requested		
—	ce requesteu.		
Dimension	al Variance		
Use Varian	ice		
	=	ling Board of Appeals is require flow with reference to <u>Section</u>	ed to consider the following items before appl
a variance. i ice	dae complete the items be	now with reference to occion	<u>10.07</u> .
	or extraordinary		
circumstance(S).		
Practical diffic	ulty:		
Substantial jus	stice.		
Cabotartiai ja	Suoo.		
	ntal to adjacent		
	ntal to adjacent d neighborhood:		
properties and	d neighborhood:		
Not in conflic purpose of the	t with intent and he City of Perry		
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Not in conflic purpose of the Zoning Ordina	t with intent and ne City of Perry		
Not in conflic purpose of the Zoning Ordina	t with intent and ne City of Perry		

3.

4. Affidavit

l,	(applicant), do	_ (applicant), do hereby swear that the information given herein is true and correct.			
Signature of Applicant	Da	ate	Printed Name of Applicant		
Signature of Property Owner (if different)		ate	Printed Name of Property Owner (if different	ent)	
I,	or which the above re	,	ermission for the City of Perry officials, staff, in proposed for purposes of verifying inform		
FOR CITY OF PERRY USE ONLY: Application No.					
Applicant Name:					
Received By:					
Date:		Time:			