Village of Cass City

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Email: ccvillage@casscity.org Office Hours 8:00am to 4:30pm M-F

INTERNAL USE ONLY

Date Received: Received By:

Receipt #:

Deposit: \$

Method of Payment:

1. FORMAL REQU	EST			
I (wa)	(applicant) of		(street and number) Village	
of Cass City Michig	(applicant) of _ gan HEREBY APPEAL TO THE B	OARD OF APPEALS ON	ZONING FOR (proposed	
use):	Jan Hercebi All Exerto Hile b	0/1/0 0/ /// 1 1/120 0/	(20 mm) (p. op 500 2	
400).				
2. LOCATION OF F	ROPERTY			
Street and Numbe	r:			
Subdivision and Lo	ot Number:			
3. DESCRIPTION C	DE CASE			
Zoning Classificati				
Description of Pro	operty			
a. Size of Lot:				
b. Area of Lot:				
c. Corner or Inter				
Description of Ex				
a. Number of Buildings on Premises:				
b. Size of Each Building Now on Premises: c. Use of Existing Buildings on Premises:				
d. Percentage of	Lot Coverage on Ground Level:			
4. DESCRIPTION C	OF PROPOSED STRUCTURE			
Height of Propose	d Structure:			
Dimensions of Proposed Building/Addition:				
Area of Proposed	Building/Addition:			
Percentage of Lot	Coverage of Building/Addition:			
5. SETBACKS AFT	ER PROJECT COMPLETION			
Front Vard (mass)	red from lot line):			
Front Yard (measured from lot line): Side Yard (measured from lot line):				
Rear Yard (measured from lot line):				
Tour Tara (modes	TOT HOLL MO.			
6. ATTACHMENTS	i			
☐ A sketch/site pla	an shall accompany the above inf	formation upon submission	on of this application.	
☐ Other attachment(s):				
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7. REASON FOR APPEAL
a. Interpretation of the Zoning Ordinance is requested because:
b. A special permit is requested pursuant to Chapter 46-7.2.C because:
c. Variance to the Zoning Ordinance is requested for these reasons (all reasons must be answered): (a) The property in question is not physically suitable for use under the limitation of the zoning district in which it is located because:
(b) The hardship created is UNIQUE and is not shared by all properties alike in the immediate vicinity of this property and in this use district because:
(c) The variance would not change the character of the district because:
8. APPEAL CITATION Article and Section number of the Zoning Ordinance that is being appealed:
9. SIGNATURE I hereby depose and say that all the above statements and the statements contained in the papers submitted herewith are true and correct.
APPLICANT SIGNATURE: DATE:
INTERNAL USE ONLY Action of the Zoning Board of Appeals: Date: Date: Denial Signature of Chair:
Comments or Conditions of Approval: