

# CITY OF EVART

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[www.evart.org](http://www.evart.org)



## APPLICATION TO RE-ZONE

**Date:**

**Applicant:**

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone# \_\_\_\_\_

**Property Owner:**

*(If different from applicant)*

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone# \_\_\_\_\_

**Site Characteristics**

1. It is requested that the property be rezoned

From \_\_\_\_\_ classification

To \_\_\_\_\_ classification

The proposed use of the property: \_\_\_\_\_

2. Location of property

Address/Location: \_\_\_\_\_

Parcel ID#: 67-51 \_\_\_\_\_

3. Is the zoning proposal in conformity with the policy and intent of the comprehensive plan?

\_\_\_\_\_

4. Will the zoning proposal permit a use that is suitable in view of the use and development of adjacent and nearby properties?

\_\_\_\_\_

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5. Will the affected property of the zoning proposal have a reasonable economic use as currently zoned?

\_\_\_\_\_

6. Will the zoning proposal adversely affect the existing use or usability of adjacent or nearby property?

\_\_\_\_\_

7. Are other existing or changing conditions affecting the existing use or usability of the development of the property which give supporting grounds for either approval or disapproval of the zoning proposal?

\_\_\_\_\_

8. Will the zoning proposal adversely affect historical buildings, sites, districts, or archaeological resources?

\_\_\_\_\_

9. Will the zoning proposal result in a use which will or could cause an excessive or burdensome use of existing streets, transportation facilities, utilities or schools?

\_\_\_\_\_

To the best of my knowledge, this zoning application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Evert.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

**APPROVALS:**

By: City of Evert Planning Commission on \_\_\_\_\_ 20\_\_\_\_.

By: City of Evert City Council on \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Zoning Administrator

\_\_\_\_\_  
Date