Checklist for Commercial
Zoning Board of Appeals Application

Applications must be submitted no later than 30 days prior to a scheduled meeting. Meetings are held the second and forth Monday of every month, unless otherwise specified. The applicant (or a representative, with written permission from the property owner) must be present at the meeting.

The following must accompany your completed application; incomplete submittals will not be accepted.

- Completed application, including original ink signatures of property owner and the applicant.
- Application fee of $500.00, cash or check payable to Orion Township.
- Proof of ownership. Acceptable forms of documentation include: Warranty Deed, Quit Claim Deed, Land Contract, or Option to Purchase with a Copy of the Warranty Deed.
- Two copies of a site plan + a PDF copy, where applicable showing:
  - Lot lines with dimensions, and the total square footage of the lot.
  - Label north point.
  - Scale used on plans.
  - Location of all existing and future buildings (including sheds, decks, pools, etc.) and lot coverage.
  - Accurate dimensions of all buildings, and the distances between them and to the nearest lot line.
  - Location of existing drainage courses, flood plains, lakes, streams and woodlots.
  - Location and size of watermains, well sites and building service, existing and proposed.
  - Identify all roads.
  - Parking areas and driveway(s).
  - Setback from the road right-of-way.
  - All adjoining properties within 100’
  - Any easements or proposed easements on or adjacent to the property.
  - Centerlines and road right-of-way widths of all abutting streets.
- Elevation drawings with dimensions of proposed buildings or additions.
- Identification and seal of architect, engineer, land surveyor or landscape architect who prepared the plans (sign submittals are not required to be sealed).
- If any of the items listed are not applicable to a particular site plan, the applicant shall specify on the site plan which items do not apply and why they are not applicable.

Please note:

- You must stake the corners of the proposed structure(s) at least one week prior to the meeting you are scheduled to attend. This allows members of the Zoning Board of Appeals see the proposed location.
- The Zoning Board of Appeals may require a registered, staked survey to verify the location of property lines. If not required by the ZBA, the Building Inspector may require one prior to approving the initial inspection.
NOTICE TO APPLICANT:
The following application must be completed and filed with the Township at least thirty days prior to a scheduled ZBA meeting in order to initiate an appeal. There is a non-refundable fee of $500.00 for a commercial application.

Regular meetings of the ZBA are held on the second and fourth Mondays of each month at 7:00 p.m. at the Orion Township Hall, 2323 Joslyn Road, Lake Orion, Michigan 48360. A minimum of three cases are required in order to hold a meeting with a maximum of five. The applicant or a representative with written permission from the property owner must be present at the meeting.

PROOF OF OWNERSHIP MUST BE INCLUDED WITH THIS APPLICATION. Acceptable forms of documentation include: Warranty Deed, Quit Claim Deed, Land Contract, or Option to Purchase with a Copy of the Warranty Deed.

APPLICANT
Name: 
Address: __________________________________________ City/State/Zip: ____________________________
Phone: ____________________________ Cell: ____________________________ Fax: ____________________________
Email: ____________________________

PROPERTY OWNER(S)
Name(s): 
Address: __________________________________________ City/State/Zip: ____________________________
Phone: ____________________________ Cell: ____________________________ Fax: ____________________________
Email: ____________________________

CONTACT PERSON FOR THIS REQUEST
Name: ____________________________ Phone: ____________________________ Email: ____________________________

SUBJECT PROPERTY
Address: __________________________________________ Sidwell Number(s): __________________________
Total Acreage: ____________ Length of Ownership by Current Property Owner: ________ Years, ________ Months
Does the owner have control over any properties adjoining this site? ____________________________
Ordinance Allowance/Requirement ____________________________ Deviation requested ____________________________
List additional ordinance requirements and deviations on a separate page.
Case #: __________________

COMMERCIAL VARIANCE

1. Describe the nature of the request. __________________________________________________________

______________________________________________________________________________________

2. Describe how the request results from special or unique circumstances particular to the property, which are not applicable to other properties in the surrounding area. ______________________________________________________

______________________________________________________________________________________

3. If the appeal is granted, please explain how the variance will/will not be materially detrimental to the public health, safety and welfare, or to other properties or improvements in the Township: ______________________________________________________

______________________________________________________________________________________

4. Explain how the request is/is not consistent with other properties in the immediate area, please site examples if possible:

______________________________________________________________________________________

______________________________________________________________________________________

5. Describe how the alleged practical difficulty has not been self-created. ______________________

______________________________________________________________________________________

6. The topography of said land makes the setbacks impossible to meet because: __________________

______________________________________________________________________________________

7. Describe how strict compliance with the ordinance unreasonably prevents the owner from using the property for a permitted purpose, or to be unnecessarily burdensome. ________________________________

______________________________________________________________________________________
Case #: ____________________

8. Have there been any previous appeals involving this property? If so, when? __________________________________________________________

9. Is this request the result of a Notice of Ordinance Violation?   ☐ Yes   ☐ No

I/We, the undersigned, do hereby request action by the ZBA on the variance or specified matter above, in accordance with Sections 30.06, 30.07, 30.10, and 30.11 of the Zoning Ordinance. In support of this request the above facts are provided. I hereby certify that the information provided is accurate and the application that has been provided is complete. As the property owner (or having been granted permission to represent the owner as to this application), I hereby grant the Zoning Board of Appeals members permission to visit the property, without prior notification, as is deemed necessary.

Signature of Applicant:  

(must be original ink signature) _______________________________ Date: _______________________________

Print Name: _______________________________

Property Owner:  

If applicable:  

I the property owner, hereby give permission to _______________________________ to represent me at the meeting.

Signature of Property Owner:  

(must be original ink signature) _______________________________ Date: _______________________________

Print Name: _______________________________

________________________________________

OFFICE USE ONLY

Zoning Classification of property: ____________________  Adjacent Zoning:  N. S. E. W. 

Total Square Footage of Principal Structure: ________________  Total Square Footage of Accessory Structure(s): ________________  

Description of variance(s):

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Date Filed: ________________  Fee Paid: ________________  Receipt Number: ________________