

CITY OF SOUTHFIELD
Department of Building & Safety Engineering

Zoning Board of Appeals – Application for Appeal Hearing

Application Fee: \$40

Appeal for (check one):

- Single Family Residential - \$400.00
- Residential Move-in - \$400.00
- Sign - \$400.00
- Commercial - \$400.00
- Special Meeting - \$750.00

Date Filed: _____

Case No: _____

Hearing Date: _____

Variance **Interpretation** **Other:** _____

Request is hereby made for permission to _____

_____ contrary to the requirements of Section _____, Article _____, Chapter _____ of the Southfield City Code, or the Building Official's interpretation of the section of the regulations upon the property known as:

Property Ownership and Legal Description:

Owner(s): _____

Address of Owner: _____

Telephone: _____ Other Contact Information: _____

Property Address: _____

The property is located on the _____ side of _____

Between _____ and _____

Sidwell Parcel #: _____ Zone District: _____ Section: _____

In accordance with plans attached and made part of this appeal.

The proposed _____

Is contrary to the aforementioned Ordinance Code or interpretation placed thereon by the Building Official, and requires Zoning Board of Appeals action for the following reasons:

(Please explain/describe proposed appeal) _____

Please provide the following information regarding the property:

The Department of Building and Safety Engineering has issued Building permits pertaining to this property.

Yes _____ No _____ Building Permit #(s) _____

Previous appeals involving this property: Yes _____ No _____ If Yes, state Case No: _____

and disposition of the Appeal Case _____

Appellant Information

Name: _____ Address _____

City: _____ State: _____ Zip: _____ Telephone: _____

Appellant's interest in property: _____

If the Appellant is other than the owner, the authorization letter provided in this application form must be completed by the Owner and must accompany this application at the time of submission. Failure to provide proper owner authorization will result in the Board's refusal to hear your case.

In connection with this appeal, I have attached hereto twelve (12) copies of the plot plan depicting this appeal and showing all buildings presently on the property, their size, setback and the arrangements for present and proposed parking spaces, buildings and structures. Plans attached should be drawn to scale, show northerly direction and the location of adjacent buildings and adjoining streets.

Signature of Appellant

Print or type signature

Relationship to Owner

Address

City State Zip

(Area Code) Phone

**STATE OF MICHIGAN
OAKLAND COUNTY**

On this _____ day of _____, 20 _____, before me personally appeared the above named person, who being duly sworn, says that he/she has read the foregoing application for the Zoning Board of Appeals, by he/she signed, and knows the contents thereof, and that the same is true of his/her own knowledge, except as to the matters stated herein to be upon information and belief, and as to those matters he/she believes it to be true.

Notary Public

County

My Commission Expires

Property Authorization

Date: _____

TO: City of Southfield
Zoning Board of Appeals
26000 Evergreen Road
Southfield, MI 48076

I, _____ have reviewed the proposed appeal for a waiver of

_____ regarding my property located at _____

in the City of Southfield, Michigan and authorize _____
(Representative)

to represent me at the Zoning Board of Appeals Hearing regarding this appeal.

If you have any questions, please feel free to contact me at _____
(Owner's Phone Number)

Owner's Signature

Address

City State Zip

On the _____ day of _____, 20 _____

_____ being duly sworn by me, did on oath execute the above authorization and acknowledged the same as his/her free act and deed.

Notary Public _____ **County** _____ **My Commission Expires**

**Property Owner
Authorization for Sign Variance**

Date: _____

TO: City of Southfield
Zoning Board of Appeals
26000 Evergreen Road
Southfield, MI 48076

(Title-Circle one)

Owner
Manager
President of _____

I, _____

have reviewed the proposed signage for _____ located
at _____, in the City of Southfield,
(Address)

Michigan and authorize _____ to
(Representative)

represent me/us at the Zoning Board of Appeals hearing regarding this appeal.

If you have any questions, please feel free to contact me at _____
(Owner's Phone Number)

Owner's Signature

Address

City State Zip

On the _____ day of _____, 20 _____

_____ being duly sworn by me, did on oath
execute the above authorization and acknowledged the same as his/her free act
and deed.

Notary Public _____ **County** _____ **My Commission Expires**