

**APPLICATION FOR REZONING, MANLIUS TOWNSHIP
ALLEGAN COUNTY, MICHIGAN**

File Number _____
Date Filed _____
Parcel Number _____
Fee Received _____ Date _____
Check Number _____
Receipt Number _____
Hearing Date _____

Planning Commission _____
 A. Action _____
 B. Date _____
Township Board _____
 A. Action _____
 B. Date _____
Expiration Date _____
Notification prior to expiration date: _____

I/We petition the Manlius Township Planning Commission and Manlius Township Board for a rezoning as described below.

1. My/Our names and addresses are as follows: _____

2. The following person/persons have an ownership interest in the land to be rezoned, as deed holders for land contract purchasers, or otherwise: (Give name and address for each)

3. The following is a description of the nature and effect of the proposed amendment:

4. The land which would be rezoned is legally described as follows, and a map is attached which shows the dimensions of the property as well as public highways bordering the property and any public or private right-of-way or easements on the property:

5. The zoning district or my/our property, which we are asking to have rezoned, is

6. (If applicable). I/We offer the following explanation of the alleged error, if any, in the Ordinance which would be corrected by the proposed amendment, as well as an explanation of why the proposed amendment would correct this error:

7. The following is a list of the changed or changing conditions in the area or in the township that made the proposed amendment reasonably necessary to promote the public health, safety and welfare:

8. Other factors in support of the proposed amendment:

DATE: _____

PETITIONERS:
