

# RAVENNA TOWNSHIP SPECIAL LAND USE APPLICATION

Ravenna Township 3770 Blackmer Road Ravenna, MI 49451 (231) 853-6205 fax(231)853-5155  
**Zoning Administrator** - Tony Zaidel (616) 322-9551

**If applicant is someone other than property owner, please complete this section:**  
 Applicant Name \_\_\_\_\_ Email \_\_\_\_\_  
 Applicant Address \_\_\_\_\_  
 Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Association To Property Owner \_\_\_\_\_

Property Owner \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Email \_\_\_\_\_

**Parcel #** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Property Address \_\_\_\_\_  
 Legal Description of Property \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Lot Size in Acres or Square Feet \_\_\_\_\_  
 Average Lot Width \_\_\_\_\_  
 Current Zoning of Property \_\_\_\_\_  
 Current Use of Property \_\_\_\_\_  
 Is Property in PA116  yes  no  
 List All Deed Restrictions of Property (attach additional pages as needed) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Names and Addresses of All Other Persons, Firms, or Corporations Having a Legal or Equitable Interest in the Property (attach additional pages as needed) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**TO COMPLETE THIS APPLICATION FOR A SPECIAL LAND USE, ALL ITEMS CHECKED BELOW MUST BE SUBMITTED WITH THE APPLICATION.**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Site Plan              | <input type="checkbox"/> Grading/Drainage Plan | <input type="checkbox"/> Landscape Plan |
| <input type="checkbox"/> Lighting Plan          | <input type="checkbox"/> Utilities Plan        | <input type="checkbox"/> Required Fee   |
| <input type="checkbox"/> County Driveway Permit | <input type="checkbox"/> _____                 | <input type="checkbox"/> _____          |

**Description of Proposed Use/Request (attach additional pages as needed)** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Relationship of the Proposed Use to the Development Plans of Ravenna Township \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Impacts of the Proposed Use to Adjacent Properties and Neighborhood \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Affirmation:**  
 I hereby attest that the information on this application and provided in association with it is, to the best of my knowledge, true and accurate. I understand that the deliberate withholding or falsification of information required above may result in denial of this application.

_____ <i>Signature of Owner</i>	_____ <i>Date</i>
_____ <i>Signature of Applicant</i>	_____ <i>Date</i>

By signing below, permission is granted for all township staff (including Planning Commissioners, Zoning Board of Appeals Appointees, and Zoning Administrator) to enter the subject property for the purpose of gathering information to review this request.

_____ <i>Signature of Owner</i>	_____ <i>Date</i>
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**FOR OFFICE USE ONLY**

Date Application Filed \_\_\_\_\_ # Pages Filed \_\_\_\_\_  
 Application Accepted By \_\_\_\_\_

*check is preferred method of payment*

Application Fee Amount _____	Escrow Deposit Amount _____
Total Received _____	Check Number _____

Mailing Date \_\_\_\_\_  
 Copy of Mailing on File?  yes  no  
 Public Hearing Date \_\_\_\_\_  
 Hearing Notice Published On (minimum of 15 days prior to hearing) \_\_\_\_\_  
 Date of Planning Commission Discussion \_\_\_\_\_  
 Date of Planning Commission Action \_\_\_\_\_  Approved  Denied  
 Date of Township Board Discussion \_\_\_\_\_  
 Date of Township Board Action \_\_\_\_\_  Approved  Denied  
 Other Action Required \_\_\_\_\_ Rezoning \_\_\_\_\_ Variance \_\_\_\_\_