

## **APPLICATION FOR ADDRESS**

All requested information must be completed.

A separate application needed for each parcel to be addressed.

| ΑF  | PPLICANT'S NAME:  |  |  |
|-----|---|--|--|
| ΑF  | PPLICANT'S ADDRESS:   |  |  |
| CI. | TY: ZIP:  |  |  |
| PH  | IONE NUMBER:  |  |  |
|     |   |  |  |
| Th  | e following must accompany the application:   |  |  |
| 1.  | A survey or an accurate drawing with <u>all</u> dimensions of subject parcel. If a drawing is being submitted, include addresses of parcels on either side and across road or street from subject parcel. |  |  |
| 2.  | . If parcel does not have a tax code, applicant <u>must</u> obtain code from Washtenaw County Equalization Department, 200 N. Main St., Suite 210 Ann Arbor, MI.  |  |  |
| 3.  | If parcel is a newly created parcel from a larger parcel, include the previous tax code and new tax code of parent parcel.  |  |  |
| 4.  | The undersigned states that the foregoing statements and attachments are true and correct to the best of their knowledge and belief.  |  |  |
| Da  | te: Signature:  |  |  |
|     |   |  |  |
| Ple | ase allow two weeks from date of application for address to be assigned.  |  |  |
| TA: | X CODE: 07  |  |  |
|     | dress assigned  |  |  |
| Dat | te address assigned   |  |  |
| Ja  | te adultess assigned  |  |  |
| Ву  |   |  |  |
|     |   |  |  |
|     | Applicant/owner, Washtenaw County Environmental Health, Chelsea Area Construction Agency, Lima Township<br>essor's office and Lima Township Treasurer   |  |  |

MAIL P O Box 59

**OFFICE** 12172 Jackson Rd Chelsea, MI 48118 | Dexter, MI 48130 | Dexter, MI 48130

HALL 11452 Jackson Rd

PHONE: 734,475,2246

EMAIL: lima@limatownshipmi.gov WEBSITE: www.limatownshipmi.gov

| <b>Application</b> | # |
|--------------------|---|
|--------------------|---|



## ZONING BOARD OF APPEALS APPLICATION FOR VARIANCE REQUEST

| Property Address: Page 1   | arcel No. G-07                              |
|--|---|
| Application is hereby made by  |   |
| Address  | Business Name if Applicable                 |
| City, State, Zip Code  |   |
| Contact Telephone Numbers  |   |
| Applicant is the owner of the property involved $\Box$ . Applicant is  | acting on behalf of property owner $\Box$ . |
| Name and address of property owner of record if not provided a Name(s)   | above.                                      |
| Address  |   |
| City, State, Zip Code  |   |
| Contact Telephone Numbers  |   |
| 1. PURPOSE OF APPEAL IS MADE HEREWITH FOR:   |   |
| Variance From Zoning Ordinance □   |   |
| Expansion of Non-Conforming Buildings & Structures   |   |
| Interpretation of the Zoning Ordinance □   |   |
| Temporary Use Permit □   |   |
| Substitution of Non-Conforming Buildings & Structures □  |   |
| <b>2. PROVISION(S) OF THE ZONING ORDINANCE APPEALED:</b> Indiv<br>Subsection, and Paragraph of the Lima Township Zoning Ordinal<br>ORDINANCE(S). | ****  |
| 3. FOR THE FOLLOWING REASONS:  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
| If additional space is needed - attach a separate sheet. Please t  | ype or print clearly.                       |