

Contact Information cclyburn@highlandparkmi.gov (313) 252-0050

# **Zoning Application**

**INSTRUCTIONS:** Print or type requested information. Incomplete applications may delay the processing of your request. Fifteen (15) copies of all drawings, maps, photographs, or other special attachments are required.

#### **APPLICANT INFORMATION**

Name:	
Company:	
Address:	
Phone:	Fax:
Email Address:	
	PROJECT ARCHITECT/ENGINEER/CONSULTANT
Name:	
Company:	
Position/Title:	
Address:	
Phone:	Fax:
Email Address:	
	PROPERTY OWNER (IF DIFFERENT FROM APPLICANT)
Name:	
Address:	
Phone:	Fax:
Email Address:	
	PROJECT INFORMATION
Address:	
Property Tax I.D. #:	
Current Use:	
Proposed Use:	
Use of Adjacent Properties:	
	Proposed Zoning:
Zoning of Adjacent Properties:	
Anticipated Construction Start Date:	



Contact Information cclyburn@highlandparkmi.gov (313) 252-0050

## **Zoning Application**

### **BRIEF DESCRIPTION OF REQUEST**

Please describe your request in complete detail. Feel free to add additional pages and/or drawings, maps, photographs of the site, and other documentation that may be helpful to the Board of Zoning Appeals as they consider your request. If you are requesting a dimensional variance, you must include a basic site plan drawing showing the location of your property lines, existing and proposed buildings, existing and proposed easements, building setbacks and heights, and other information necessary to adequately and accurately depict the nature of your request. To be eligible for a variance, your project must meet the standards set forth in Chapter 1288 of the Zoning Code. <u>Please refer to the Zoning Code for these standards. Your application should fully and completely address these standards to be considered.</u>

### VARIANCE(S) REQUESTED (IF REQUESTING A VARIANCE) (MAXIMUM OF 3 VARIANCES PER FILE):

1.	 
2.	
3.	

**APPLICANT CERTIFICATION:** By signature(s) affixed hereto, I (we) certify that the information contained in this application and accompanying documentation is, to the best of my (our) knowledge, true, accurate, and complete. Furthermore, I (we) hereby authorize the City of Highland Park and its officials, agents, and representatives to enter the property associated with this application for the purpose of conducting necessary site reviews and investigations.

Signature of Applicant:	Date:
Signature of Applicant:	Date:



**Contact Information** cclyburn@highlandparkmi.gov (313) 252-0050

٦

# **Zoning Application**

OFFICE USE ONLY						
Date Application Received:	Expedited Review					
□ Name of Intake Professional:	□ Application Requires Public Hearing? Date:					
Fee Paid 🗆 Yes 🗆 No Amount Paid: \$	Receipt Issued					
Preliminary Agenda Date:	□ Income Tax Filing Status Reviewed:					
	$\Box$ Check if not applicable					
$\Box$ Applicant Has Current Business License: $\Box$ Yes $\Box$ No	Planning Commission Final Action:					
$\Box$ BZA Final Action: $\Box$ Approved $\Box$ Denied Action Date:	Approved Denied Action Date:					
Conditions Placed on Approval: Yes No If yes, explain:						
WATER DEPARTMENT CERTIFICATION						
By way of a database search, the applicant as listed above does	not currently owe monies to the City of Highland Park for water					
assessments or other property maintenance charges.						
Comments:						

Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

### **TAX & ASSESSMENT CERTIFICATION**

By way of a database search, the applicant as listed above does not currently owe monies to the City of Highland Park for property taxes, personal property taxes, other property maintenance charges

Comments: \_\_\_\_\_

### Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Date: \_\_\_\_\_\_

### **COMMUNITY & ECONOMIC DEVELOPMENT CERTIFICATION**

#### Comments: PACKAGE READY FOR DEPARTMENTAL REVIEW

Signature: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Printed Name: \_\_\_\_\_\_ Date: \_\_\_\_\_\_ Date: \_\_\_\_\_\_



Contact Information cclyburn@highlandparkmi.gov (313) 252-0050

# **Zoning Application**

### ZONING APPLICATION FEE SCHEDULE

Service Description	Planning Services Fee
Board of Zoning Appeals	
Appeal from Administrative Action or Ruling	\$750.00
Use or Dimensional Variance Request	\$750.00
Request for Zoning Code Interpretation	\$750.00
Site Plan Review	\$1,000.00
Special Land Use Permits	
Special Land Use Review	\$1,000.00 + 20.00 per acre or fraction thereof
Special Land Use Review with Site Plan Review	\$1,000.00
Zoning Ordinance Text/Rezoning or Map Amendment Hearing	\$1,000.00 + \$20.00 per acre or fraction thereof
Planned Unit Development (PUD)	\$1,000.00 + (Site Plan Fee) + (Condominium Review Fee)
	If Applicable
Preliminary Plat – Tentative Review	\$1,000.00
Preliminary Plat – Final Review	\$800.00
Final Plat	\$600.00
Master Deed or By-Laws	\$500 per document
Zoning Compliance Permits	
Lot Split/Combination	\$250.00 + \$40.00 per Lot
Non-Residential Site Improvements	\$325.00
Single Family Home	\$250.00
All Other (Residential Fences, Accessory Structures, Etc.)	\$175.00
Alley or Street Vacations	\$600.00 + \$35.00 per Abutting Lot
Signs	\$350.00 per sign + \$150.00 for each additional sign on the same site
Fences	\$185.00
Other Reviews	\$500.00 deposit – Hourly rates vary
Revisions – each additional technical review	0.6 x regular fee
Expedited Review	1.5 x regular fee