



**TSEGO
TOWNSHIP**
EST 1833

Application for Rezoning

P.C. Case Number
Date
Parcel I.D. Number

Property Owner(s) Name	Applicant(s) Name
Mailing Address	Mailing Address
City, State, ZIP	City, State, ZIP
Phone	Phone

This application must be signed by the property owner(s). In lieu of a signature on this application, the owner may provide a letter authorizing the applicant to act on his/her behalf. This application will not be processed until authorized by the property owner.

Current Zoning of Property	Location of Property
Proposed Zoning of Property	Address _____
Master Plan Designation	N S E W Side of _____ Road between _____ & _____ Roads
Zoning of Surrounding Parcels North: _____ South: _____ East: _____ West: _____	Total Acreage of Existing Site
Is this proposed rezoning consistent with the Otsego Township Master Plan? ____ Yes ____ No If not, explain below the reasons why the applicant feels the subject property should be rezoned:	
Insert below (or attach) accurate legal description of property:	
Property Size (acreage and dimensions):	
Has a Special Use Permit been granted for this property (if yes, explain the type of Special Use Permit. Enter "none" if none exist):	

I, the Land owner / Property owner, hereby give the Township Officials permission to access property regarding this application for the purpose of inspection as needed for the sole purpose of this application.

Signature of Land owner/property owner _____ Date _____

Reason for request:
Present improvements on the property buildings and other structures (enter "none" if none exist):
List any private restrictions that encumber the property or its uses (enter "none" if none exist):

A survey or scale drawing showing parcel dimensions, adjacent roads, and existing buildings must accompany this petition. an accurate legal description must also be provided

Owner(s) Signature
Applicant(s) Signature (if other than owner)

DO NOT WRITE BELOW THIS LINE - TOWNSHIP USE ONLY

Application Fee	Date Received and by	Receipt Number
Date Notices Mailed	Public Hearing Date	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Approved with Conditions (list below or attach): _____ Date _____		
Signature Zoning Administrator	Date	