



**Raisinville Township**

96 Ida-Maybee Road  
Monroe, Michigan 48161  
(734) 269-2506  
www.raisinville.org

# Rezoning Application

Submittal Information & Requirement Checklist		Township Use
<b>This application is being submitted for the following consideration:</b>		Date Received:
<input type="checkbox"/> Rezoning		Received By:
<input type="checkbox"/> Completed Application Form	<input type="checkbox"/> 10 Sets of Proposed Plot Plan	Amount Paid:
		Public Hearing Date:
General Information		
<b>Name of Legal Owner(s):</b>		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
<b>Name of Applicant (if different than Owner):</b>		
Company:	Interest in Property:	
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
<b>Name of Site Planner/Engineer:</b>		
Company:		
Address:		
City:	State:	ZIP Code:
Phone:	Fax:	E-mail:
Property Information (attach Plan)		
Parcel ID Number(s):		
Land Area (in acres):	Width (in feet):	Length (in feet):
Current Zoning Classification:		
Proposed Zoning Classification:		
Existing Use:	Proposed Use:	
Name of Proposed Project:		
Proposed Project Description:		
Property Location/Address:		
City:	State:	ZIP Code:
Property Legal Description (attach separate sheet if necessary):		
Deed Restrictions or Court Decisions (applying to property):		

## Rezoning Considerations

**Describe how the proposed rezoning classification will accomplish each of the following:**

A. Be consistent with both the policies and the uses proposed for that area in the Master Land Use Plan? If not, is the plan current and reasonable, or does it need to be updated.


B. Be consistent with other zoning and land uses in the area.


C. Be consistent with development trends in the area.


D. Are uses in the proposed zone equally or better suited to the area than the current uses?


## Affidavit

The applicant(s) represents that they are the owner(s) of the subject property or are acting on behalf of the above listed owner. The applicant also acknowledges that the filing of this application grants permission for Township staff and/or officials to enter the property to determine the accuracy of the submitted information including existing conditions. If the applicant is not the owner, the owner must also sign.

Signature of Applicant:	Date:
Signature of Legal Owner:	Date:

## Township Use

Date of Final Review:

Planning Commission Action (list conditions, if any):

	Date:

Monroe County Planning Commission Action (list conditions, if any):

	Date:

Township Board Action (list conditions, if any):

	Date:

Zoning Amendment # :

	Date:
Amended by:	