

**CARROLLTON TOWNSHIP ZONING BOARD OF APPEALS
APPLICATION FOR SPECIAL EXCEPTION
(Type or print in ink)**

APPEAL CASE # _____

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

PHONE NUMBER: _____

1. I (We) the above named applicant(s) hereby appeal to the Zoning Board of Appeals in accordance with Chapter 9 of the Zoning Ordinance and apply for Special Exception.

2. The property in question is located at:

_____, Michigan being legally
(Address)

Described as: _____

3. A previous appeal has () has not () been made with respect to this property. Previous Appeal Case # _____, dated _____, 19____. (To be completed by Clerk). Decision on previous appeal:

4. This appeal is for a Temporary Permit for a housing structure on the above named property.

5. I (We) authorize _____
to act as my (our) authorized agent in the hearing on my (our) appeal. (Additional information may be attached).

Signed:

(Appellant)

(Date)

(Appellant)

(Date)

CARROLLTON TOWNSHIP BOARD OF APPEALS

The following items must be included as part of your Board of Appeals application:

1. Plot Plan – show all property lines and buildings on a scaled and dimensioned drawing.
2. Front and Side Elevations – Show how building(s) will appear as altered or proposed.
3. Floor Plans – Show all rooms, doors, and windows.
4. Photographs – Include at least three (3) pictures of the site and proposed structures.
5. Include all other information that may be relevant to the appeal (i.e.: adjacent property, neighborhoods, etc.).

To be completed by Municipality:

Date Received: _____

Fee Received: _____

Case Number: _____

Property is presently zoned _____

Property is shown on Land Use Map as _____

Copy sent to:

1. Zoning Administrator _____ 19____
2. Planning Commission _____ 19____
3. Board of Appeals _____ 19____

Further Actions:
