

**APPLICATION FOR REZONING
WEST BRANCH TOWNSHIP, OGEMAW COUNTY, MICHIGAN**

Web page: westbranchtownship.org

Map Amendment # _____

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: () _____

Property Owner: (If other than applicant): _____

EXISTING ZONING DISTRICT CLASSIFICATION: _____

PROPOSED ZONING DISTRICT CLASSIFICATION: _____

PROPERTY ADDRESS: _____

PROPERTY PARCEL NUMBER: 65-014-_____ Parcel Size: _____ Acres.

Legal Description: _____

State the reason the current zoning of the property should be changes and how this request meets the criteria for amending the official zoning map listed in Section 5 of the West Branch Township Zoning Ordinance. (Copy attached).

I (we) hereby certify and agree that all uses for which this application is made will conform to the data and information submitted with this application and all ordinances affecting West Branch Township, Ogemaw County, MI. It is further agreed that any deviations from the data submitted shall constitute a violation of the West Branch Township Zoning Ordinance and invalidate the permit request. I (we) hereby authorize any member (s) of the West Branch Township Planning Commission to perform a site visit at the above referenced property.

Applicant's Signature

Date

FOR OFFICIAL USE ONLY

DATE APPLICATION FILED WITH WEST BRANCH TOWNSHIP PLANNING COMMISSION:

REVIEW DATE: _____ APPROVAL/DENIAL DATE: _____

REASON FOR DENIAL (If applicable): _____