

DAVISON TOWNSHIP 1280 N IRISH RD DAVISON MI 48423
810-653-4156 FX 810-658-3435

APPLICATION FOR A USE VARIANCE PERMIT

- \$210.00 NON-REFUNDABLE FILING FEE IS DUE AT TIME OF APPLICATION.
- AN AFFIDAVIT, SIGNED AND NOTARIZED, IS ALSO DUE WHEN APPLICATION IS MADE. A SAMPLE AFFIDAVIT IS ATTACHED TO THIS SHEET; YOU MUST FOLLOW THIS FORMAT WHEN MAKING YOUR AFFIDAVIT.
- SITE DRAWING
FROM USE VARIANCE LANGUAGE TOWNSHIP ZONING ORDINANCE

The zoning board of appeals shall have the power to authorize, upon an appeal, a use variance for a specific use of land that is not otherwise permitted in the district in which the property is located where the strict application of the regulations enacted would result in an unnecessary hardship upon the owner of such property. In granting a use variance, the Zoning Board of Appeals may attach thereto such conditions regarding the location, character, and other features of the proposed use as it may deem reasonable in the furtherance of the purpose of this Ordinance. A use variance shall not be granted unless all the following standards have been met:

- A. The property cannot reasonably be put to a conforming use (i.e. that the property cannot yield a reasonable economic return if it is used in strict compliance with Ordinance).
- B. The plight of the owner is due to unique circumstances of the property and not to general neighborhood conditions which may reflect the unreasonableness of the zoning itself.
- C. The use to be authorized will not alter the essential character of the locality.
- D. The problem is not self-created
- E. A use variance granted shall be the minimum that will make possible a reasonable use of the land, building, or structure.

THE ZONING BOARD OF APPEALS SHALL NOT APPROVE AN APPLICATION FOR A USE VARIANCE UNLESS IT HAS FOUND POSITIVELY THAT A PRACTICAL DIFFICULTY EXISTS UNDER THE PROCEEDING CRITERIA.

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**USE THIS SAMPLE TO LAYOUT YOUR
AFFIDAVIT**

State of Michigan
County of Genesee

I, _____, being duly sworn, depose and say the following to be true and accurate:

- A. Respond to Item A on Page 1.
- B. Respond to Item B on Page 1.
- C. Respond to Item C on Page 1.
- D. Respond to Item D on Page 1.
- E. Respond to Item E on Page 1.

Your Signature

Subscribed and sworn before me this _____ day _____, _____
Date Month Year

Notary Public
Genesee County, Michigan

My commission expires _____