APPLICATION FOR RE-ZONING
CITY OF ROGERS CITY
193 E. Michigan Ave. ~ (989) 734-2191

DATE RECEIVED: _____
BY: _____
FEE PAID: _____

1. Legal description of subject property (Tax No., plat and lot, or metes and bounds description): ___
_____
_____

2. Size and general location of property (acreage, dimensions, street, street number, or nearest landmark): _____
_____

3. Present improvements on the property (buildings, other structures): _____
_____

4. Nature of applicant's interest in the property (deed-holder, option, land contract purchase, tenant, other): _____
_____

5. If applicant's interest is other than deed-holder, does the deed-holder know of this application and consent thereto? Yes _____ No _____

6. The following private restrictions encumber the property (if none, so state), otherwise list such restrictions or attach a copy._____
_____

7. The purpose of the rezoning is to use the property as follows: (description of operations and construction, if any): _____
_____

8. Will the proposed rezoning be in compliance with the Rogers City Land Use Plan?
Yes _____ No _____
(If no, a petition to amend the Land Use Plan will be required as part of this application)

9. It is hereby requested that the foregoing described property be rezoned:
From: _____ To: _____

NAME OF APPLICANT (Printed or Typed): _____

SIGNATURE OF APPLICANT: _____

ADDRESS: _____

TELEPHONE: Work: _____ Home:_____

FOR OFFICIAL USE ONLY

Date Approved: _____ Reasons: _____

Date Rejected: _____ _____

TK:11/21/07:REVISION 0