



CITY OF SYLVAN LAKE 1820 Inverness, Sylvan Lake MI 48320
(248) 682-1440 * (248) 682-7721 (Fax) www.Sylvanlake.org

APPLICATION FOR REZONING

Name: _____ Date Received: _____

PART 1 – PROPERTY INFORMATION

1.1 Address: _____

1.2 Please provide the following information for each parcel in the rezoning site. If more than one zoning classification is requested, provide the acreage for each zone and show the dimensions of each zone on the preliminary development plan. Attach additional sheets if necessary.

| Current Zoning | Proposed Zoning | Current Use | Area Sq. Ft. or Acres | Tax ID# |
|----------------|-----------------|-------------|--------------------------|---------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

PART 2 – PROPOSED USE

2.1 Proposed Use (Please be specific; attach additional sheet if necessary.)

- 2.2 Number of Structures _____ Number of Stories _____ Height of Structures _____
- 2.3 Number of Residential Units _____ Floor area of Residential Units _____
- 2.4 Floor Area of Non-residential Projects _____
- 2.5 Lot Coverage of Structures (sq. ft. and Percent) _____ Of all impervious surface _____
- 2.6 If multiple structures/uses list number and uses on a separate sheet

PART 3 – APPLICANT INFORMATION

3.1 Applicant or Agent _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

3.2 Owner _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Attach additional sheets listing any additional owners.

3.3 Architect/Engineer/Other _____

Company Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

PART 4 – PLANNING INFORMATION

4.1 On a separate sheet provide a statement describing the nature of the proposal and the reasons for the request. See Section 78-61 of the City Code.

PART 5 – MATERIALS REQUIRED WITH APPLICATION

5.1 The following are required for all rezoning requests:

- 5.1.1 Appropriate fees payable to the City of Sylvan Lake.
- 5.1.2 Complete legal description of each property to be rezoned.
- 5.1.3 Fully-dimensioned drawing to scale showing all parcels affected by the amendment, including all public and private rights-of-way and easements bounding and intersecting that land under consideration.
 - 11" x 17" minimum with scale requirements as follows:
 - a. 1" = 20' if parcel is less than 4 acres
 - b. 1" = 50' if parcel is less than 4 to 10 acres
 - c. 1" = 100' if parcel is greater than 10 acres.
- 5.1.4 Electronic copy of all plans emailed to permits@sylvanlake.org

PART 6 – SIGNATURES

I (We), the undersigned, request consideration to amend the present zoning boundaries as described in this application and supporting materials. I (We) represent that the information in this application and the supporting materials are true and accurate to the best of my (our) knowledge.

6.1 _____
Owner Signature _____
Date

6.2 _____
Applicant/Agent Signature (if not owner) _____
Date

**An application not signed by the owner, must be accompanied by a separate, signed letter, from the owner, granting authority to the applicant/agent to act on his/her behalf.*