

APPLICATION for ZONING APPEAL
Baroda Township, Berrien County, Michigan

Appeal Number: _____

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Property Address: _____

Permanent Parcel Number: _____

Existing Zoning: _____ Proposed Use: _____

State the nature of the appeal, interpretation, or variance request.

Section of the ordinance relating to the request: _____

A site plan must be provided (10 copies). Does one accompany the application? _____

Applicant's Signature: _____ Date: _____

I hereby attest that the information provided on this form is correct to the best of my knowledge, true and accurate. I hereby grant permission to the Township officials to enter the above described property for the purposes of gathering information related to this application. *Note to applicant: This permission is optional and failure to grant permission will not affect any decision on the application, but may delay the ability to render a decision until sufficient information is provided by the applicant.*

I hereby understand that the request must meet all of the standards in Section 21.04.A

It is the applicant's responsibility to meet the requirements of the Baroda Township Zoning Ordinance in all respects. Copies of the Ordinance may be obtained from the Baroda Township Offices.

For Office Use Only

Date application filed: _____

Fee amount: _____ Date paid: _____

Date of Zoning Board of Appeals Meeting: _____

Advertised: _____ Date Property Notices Sent: _____

Action Taken: _____