

City of Muskegon Planning & Zoning Application

Planning Commission*	Zoning Board of Appeals* (also answer questions on pg. 2)
<input type="checkbox"/> Amendment to Ordinance (\$600) <input type="checkbox"/> Rezoning (\$600) <input type="checkbox"/> Special Use Permit (\$600) <input type="checkbox"/> PUD - Preliminary (\$600) <input type="checkbox"/> PUD - Final (\$600) <input type="checkbox"/> PUD - Amendment (\$500) <input type="checkbox"/> Vacation - Alley or Street (\$600)** <input type="checkbox"/> Special Meeting (\$500 additional)	<input type="checkbox"/> Variance (\$200 Residential/ \$400 Commercial/Industrial) <input type="checkbox"/> Ordinance Interpretation (\$200 Res./ \$400 Com./Ind.) <input type="checkbox"/> Zoning Appeal (\$200 Res./ \$400 Com./Ind.) <input type="checkbox"/> Special Meeting (\$400 additional)
Site Plan Review* †	
<input type="checkbox"/> Staff Review - Minor (\$200) <input type="checkbox"/> Staff Review - Major (\$400) <input type="checkbox"/> Planning Commission Review (\$600)	
<input type="checkbox"/> Mobile Food Vendor Permit: <input type="checkbox"/> 89 days or less (no fee) OR <input type="checkbox"/> 90 days – 1 year (\$100 / \$500 w/public hearing)	

*Application fees are non-refundable **Alley/Street vacations require 90 days advance notice † Staff will provide free conceptual plan reviews upon request

Property Information

Address/Location: _____

Current Zoning: _____ **Current Use:** _____

Proposed Zoning: _____ **Proposed Use:** _____

Explanation of Request: _____

PLEASE SUBMIT ALL REQUIRED SITE PLANS DIGITALLY TO: planning@shorelinecity.com

Applicant Information

Name: _____ **Organization:** _____

Address: _____

Phone : _____ **Alt. Phone :** _____

E-mail: _____

I hereby attest that all information on this application is, to the best of my knowledge, true and accurate.

Signature: _____ **Date:** _____

Applicant is the: Owner Lessee Contractor/Architect Other: _____

If the applicant is not the owner of the property, complete the following:

Owner's Name: _____

Address: _____

Phone: _____ **Email:** _____

Signature of Owner: _____ **Date:** _____

I hereby grant permission for members of the City of Muskegon (Planning Commission / Zoning Board of Appeals / City Commission / Staff) to enter the property described below (or as described in the attached) for the purpose of gathering information related to this application. (Note to applicant: This is optional and will not affect any decision on your application)

Signature of Owner: _____ **Date:** _____

To be completed by City staff:

Date Received: _____ **Received by:** _____

Paid by: Cash Credit Check **Check number/amount:** _____

Meeting date (if applicable): _____ ZBA PC

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These questions are ONLY for Zoning Board of Appeals requests

1. Why should your property be unique compared to others in the neighborhood?

2. What property rights do your neighbors enjoy that you can't because of the nature of your property?

3. Will granting a variance to you negatively affect your neighbors or the public?

4. Who or what is the cause of the difficulty with the current ordinance?

5. Do you have reasons, other than financial gain, for asking for the variance?

6. Could you get by with less of a variance from the ordinance requirement(s)?

7. Will this variance alter the essential character of the area?

8. Is your preferred property use specifically mentioned in the ordinance as not being allowed in your zoning district?

A complete description of zoning variances can be found in Article XXV of the City of Muskegon Zoning Ordinance
Visit www.shorelinecity.com for more information