

City of Ann Arbor PLANNING & DEVELOPMENT SERVICES — PLANNING DIVISION

301 East Huron Street | P.O. Box 8647 | Ann Arbor, Michigan 48107-8647 p. 734.794.6265 | f. 734.994.8312 | planning@a2gov.org

APPLICATION FOR CHANGES IN OR ADDITIONS TO THE ZONING CHAPTER

See www.a2gov.org/planning/petitions for submittal requirements.

TO: The Honorable Mayor and City Council City of Ann Arbor Ann Arbor, Michigan

> We, the undersigned, respectfully petition the Honorable Council of the City of Ann Arbor to amend the Zoning Map as it relates to the property hereinafter described. (Give or attach legal description and include location of property) The petitioner(s) requesting the zoning/rezoning are: (List petitioners' name; address; telephone number; and interest in the land; i.e., owner, land contract, option to purchase, etc.) Also interested in the petition are: (List others with legal or equitable interest) The applicant requests that the Official City Zoning Map be amended to reclassify this property from to _____to ____to permit the following use(s): _____

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(state intended use)

Justif	ication:		
1.	The extent to which the zoning/rezoning requested is necessary:		
2.	This zoning/rezoning will affect the public welfare and property right of persons located in the vicinity in the following ways:		
3.	This zoning/rezoning will be advantageous to the City of Ann Arbor in the following ways:		
4.	This particular location will meet the convenience and service requirements of potential users or occupants in the following ways:		
5.	Any changed or changing conditions in any particular area, or in the municipality generally which may have bearing on the proposed zoning/rezoning are:		
6.	Other circumstances and factors which will further justify the requested zoning/rezoning are:		

<2> 6/22/11

Attached is a scaled map of the property proposed for zoning/rezoning, showing the boundaries of the property, the boundaries of the existing zones, the boundaries of the proposed zones, and the public and/or private easements located within or adjacent to the property petitioned for zoning/rezoning.

The undersigned states he/she is interested in the property as aforesaid and that the foregoing statements are true and correct to the best of his/her knowledge and belief.

Dated:		
	Signature:	
		(Print name and address of petitioner)
	Signature:	
		(Print name and address of petitioner)
STATE OF MICHIGAN COUNTY OF WASHTENAW		
who being duly sworn, say that th	hey have read the foregoing per of their knowledge, except a	personally appeared the above-named petitioner(s) petition by them signed, and know the contents as to the matter therein stated to be upon their to be true.
	Signature:	
		(Print name of Notary Public)
		My Commission Expires:

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