

Fee: \$500.00 for first acre or portion thereof, plus an additional \$100 per additional acre or portion thereof.

CHARTER TOWNSHIP OF LANSING 3209 WEST MICHIGAN AVENUE		
PHONE: (517) 485-4063	LANSING, MICHIGAN 48917	FAX: (517) 485-3276

PETITION FOR CHANGE OF ZONING

I. Eight (8) copies of this Petition must be submitted to the Zoning Administrator.

II. PROPERTY INFORMATION

A. The undersigned applicant does hereby petition to change the zoning on the following legally-described property. Also list all deed restrictions and explain how they will affect the proposed development. (Attach additional sheet if necessary):

B. Situated at the following address: _____

C. The applicant does hereby request that the Lansing Charter Township Zoning Ordinance be amended to reclassify this property from zone _____
to zone _____ to permit the following use: _____
_____.

D. Required Plot Plan: Eight (8) copies of a Plot Plan of this property drawn to scale, showing both existing zone boundaries and those proposed, are hereby attached and part of this Petition. The Plot Plan shall be drawn to scale as prescribed by the Lansing Charter Township Planning Commission and shall show in detail:

- 1) The existing conditions:
 - a) Soils
 - b) Topography
 - c) Existence of a floodplain, if any
 - d) Available utilities (sewer, water)
 - e) All adjacent land uses
 - f) Location of roads, road types (state, county or local): major, secondary or collector road) and
 - g) Location of drains

- 2) The proposed conditions:
 - a) Type of development
 - b) Number of residential units (if applicable)
 - c) Total acreage to be rezoned
 - d) Proposed density of residential units (if applicable)
 - e) Parking facilities
 - f) Street layout
 - g) Type and proposed location of utility connections (water, sewer)

E. Where public sewer service is not available for use on the site proposed for rezoning, the Petitioner is responsible for submitting (attached to this petition), eight (8) copies of a soil percolation test. NOTE: Percolation tests must be made by a Registered Engineer or by a person designated to do so by the County Board of Health. Percolation tests are to be done in accordance with the procedures prescribed by the Lansing Charter Township Planning Commission.

F. Statement of Justification

1) State specifically the reason for this rezoning request at this time. _____

2) Will this rezoning enable expansion of an existing building or use? _____

3) If the proposed use is commercial in nature, has a market study been conducted? _____
(If so, please attach 8 copies.)

4) If no market study has been done, why not? _____

5) Will this rezoning be in conformance with the Comprehensive Development Plan where it exists? _____ Note: The Charter Township of Lansing adopted a Comprehensive Land Use Plan in 2010.

6) If the proposed zone is nonconforming to the Plan, why should the change be made? Please be specific and brief. (Attach any supporting documentation that substantiates your claim.)

G. Specific Information on the Proposed Development: Commercial and Industrial:

State the Proposed commercial or industrial use:_____

What noise, smoke, dust or odors can be expected to result from this proposed use?_____

State the distance from the nearest boundary of the proposed rezoned area and the closest:

a) Residential Unit _____

b) Public Sewer Connection _____

c) Public Water Connection _____

Estimate the Probable:

d) Total Number of Employees _____

e) Total Floor Area of the Structure (Square Feet) _____

f) Generated Traffic Volume (Number of Cars) _____

g) If desired, please comment further on any of the above questions or additional data:_____

(Attach additional sheets if necessary)

III. AFFIDAVIT

The undersigned affirms that he or she is the _____
(specify owner, lessee or other type of interest) involved in the Petition and that the foregoing
answers and statements herein contained and the information herewith submitted are in all respects
true and correct to the best of his/her knowledge and belief.

SIGNED _____

ADDRESS _____

PHONE _____