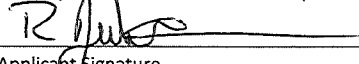
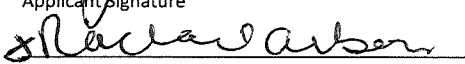


## VIENNA TOWNSHIP ZONING BOARD OF APPEALS APPLICATION

I. PROPERTY INFORMATION			
Address or Parcel Number: <u>1275 Morgan rd</u>		Site Plan Included:    Y    N <i>(Please Include some form of site plan)</i>	
Description of General Location:			
Current Zoning:	Lot Size:	Current Use:	
Requesting: <input type="checkbox"/> Variance <input type="checkbox"/> Interpretation <input type="checkbox"/> Administrative Appeal			
Type of Variance(s): <input type="checkbox"/> Setbacks <input type="checkbox"/> Signage <input type="checkbox"/> Parking <input checked="" type="checkbox"/> Other (Describe Below) <u>Steel Carport off side in front of home</u>			
Reason / Description of Request: <u>Hill Grading, septic field, well system</u>			
II. APPLICANT INFORMATION			
Name: <u>Robert Julite</u>		Phone: <u>248-506-7944</u>	
Mailing Address: <u>1275 Morgan rd</u>	City: <u>Clio</u>	State: <u>MI</u>	Zip: <u>48420</u>
III. PROPERTY OWNER INFORMATION (if different from applicant)			
Owner Name: <u>Rachael Arbour</u>		Owner Phone: <u>810-835-1962</u>	
Owner Address: <u>1275 Morgan rd</u>	City: <u>Clio</u>	State: <u>MI</u>	Zip: <u>48420</u>
IV. CHECKLIST (Please answer each question to the best of your ability & explain your answer on next page)			
1. Special or unique conditions and circumstances exist which are not generally applicable to other lands, structures, or buildings in the same district.			<input type="checkbox"/> Yes <input type="checkbox"/> No
2. The provisions of this ordinance would deprive the applicant of rights commonly enjoyed by other properties in the same district; and that the variance is the minimum necessary.			<input type="checkbox"/> Yes <input type="checkbox"/> No
3. The special conditions and circumstances do not result from the actions of the applicant.			<input type="checkbox"/> Yes <input type="checkbox"/> No
4. The granting of the variance will be in harmony with the general purpose and intent of this ordinance.			<input type="checkbox"/> Yes <input type="checkbox"/> No
5. The variance will not be injurious to the neighborhood or otherwise detrimental to the general welfare.			<input type="checkbox"/> Yes <input type="checkbox"/> No
6. The spirit of this ordinance shall be observed, public safety secured and substantial justice done.			<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby affirm that the information provided for this hearing is accurate to the best of my knowledge.

	<u>2806124</u>	<u>Robert Julite</u>
Applicant Signature	Date	Applicant Name Printed
	<u>10/28/24</u>	<u>Rachael Arbour</u>
Owner Signature	Date	Owner Name Printed

OPTIONAL: By signing below, I hereby grant permission for Vienna Township Officials and/or Zoning Board of Appeals Members to enter my property for on-site inspection related to this application. *(Failure to grant permission will not affect any decision on your application)*

Owner Signature

Date

Office Use Only: Fees Paid: <input checked="" type="radio"/> Y <input type="radio"/> N    Amount Paid: <u>800</u> Date Paid: <u>10/27/24</u> Hearing Date: <u>11/20/24</u>	
Decision: <input type="checkbox"/> Approved <input type="checkbox"/> Denied    Determination: _____	
_____	_____
Vienna Township ZBA Signature	Vienna Township ZBA Name Printed