## CITY OF WOODHAVEN APPLICATION FOR REZONING

FOR CITY USE			
Rezoning App. No	Fee Paid		
Applicant's Name	Date Received _		
NOTICE TO APPLICA	NT:		
7:00 p.m., in the Woodh copies of the properly co	aven Planning Commission are held on the 2 <sup>nd</sup> Tue aven City Hall, 21869 West Road, Woodhaven, Mompleted applications shall be submitted to the Cit ays prior to meeting. Rezoning Applications required approval.	Michigan. Fourteen (14) by Clerk's Office at least	
TO THE PLANNING C	COMMISSION:		
Planning Commission to	do hereby respectfully make application and petit o amend the Zoning Ordinance and change the Zor t of this Application, the following facts are show	ning Map as hereinafter	
1. The property is part	of a recorded plat: The property sought to be rezo	oned is located at	
between			
and	on theside of t	he street and is known	
as Lot(s) No	of	(Subdivision).	
It has a frontage of _	feet and depth of	feet.	
	creage, and is not therefore a part of a recorded plated and described as follows: (Indicate total acrea		
3. The property sought	The property sought to be rezoned is owned by:		
Name:			
Phone No:	Fax No		

4.	Attached hereto, and made a part of this petition are fourteen (14) copies of legal document showing that the applicant(s) is in fact, owner or mortgagee of the lot(s) or Parcel(s) in question.		
5.	It is desired and requested that the foregoing described property be rezoned from		
	to		
6.	It is proposed that the property will be put to the following use:		
7.	It is proposed that the following buildings will be constructed:		
8.	We attach a statement hereto indicating why, in our opinion, the change requested is		
	necessary for the preservation and enjoyment of substantial property rights, and why such a		
	change will not be detrimental to the public welfare, nor the property of other persons located		
	in the vicinity thereof.		
9.	Attached hereto are two (2) prints of a plot plan showing the lot or parcel in question, and the		
	intended lay out. These prints are made a part of this petition and are drawn to scale.		
	Printed Name of Applicant:		
	Signature of Applicant:		
	Address:		
	Phone No: Fax:		