

# ZONING BOARD OF APPEALS

City Of Evert, Osceola County, Michigan  
200 S. Main Street, Evert Mi 49631

Phone: 231.734.2181 / Website: [www.evert.org](http://www.evert.org)  
Planning & Zoning Email: [citymanager@evert.org](mailto:citymanager@evert.org)

Permit Number: \_\_\_\_\_



Application Number: \_\_\_\_\_

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## APPLICANTS INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

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## PURPOSE OF HEARING

- Appeal from a Determination by the Zoning Administrator
- Apply for a Variance Permit as Authorized by Section(s) of the City of Evert Zoning Ordinance
- Request Extension or Resumption of a Nonconforming Use
- Request an interpretation of the Zoning Ordinance

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## PROPERTY INFORMATION

Parcel #: \_\_\_\_\_ Property Address: \_\_\_\_\_

Name of Property Owner(s): \_\_\_\_\_

Property Owner's Current Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone #: \_\_\_\_\_

Description of Proposed Improvements: \_\_\_\_\_

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Please Attach the Following Documents:

- Site Plan/Plot Plan – drawn to scale, showing size and shape of buildings, accurate locations on lots, and accurate dimensions.
- Elevation Drawings – showing the height of the structure(s)
- Additional Drawings/Information as Listed Below: \_\_\_\_\_

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- Fees: include initial fee as required in the Fee Schedule Form

Affidavit: The undersigned affirms that he/she is the \_\_\_\_\_ (owner, agent, lessee, or other interested party) involved in this petition and that the foregoing answers, statements and information are in all respects true and, to the best of his/her knowledge, correct. By making this application, the undersigned grants all officials, staff and consultants of the City of Evert access to the subject property as required and appropriate to assess site conditions in support of a determination as to the suitability of the proposed project and/or current or future Sign Permit and Zoning Ordinance compliance.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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BELOW FOR CITY USE ONLY

Application Number: \_\_\_\_\_ Date of Advertising: \_\_\_\_\_

Date Received: \_\_\_\_\_ Date of Hearing: \_\_\_\_\_

Fee Tendered: \_\_\_\_\_ Action Taken: \_\_\_\_\_

Notes: