

City of Lathrup Village **Construction Board of Appeals** 27400 Southfield Road Lathrup Village, MI 48076

Phone: (248) 557-2600

Office Use Only

Date Submitted:	
CBA Review #:	
Fee Paid:	
Hearing Date:	

A HERITAGE OF GOOD LIVING -Fax: (248) 557-2602

	()			
	Construction Board of	f Appeals A	Application	
Subject Property Address:				
Subject Property Parcel Num	ber:			
Property Zoning:				
Current Use:				
Proposed Use:				
Applicant Information				
Name:				
Address:			State:	Zip Code:
Phone Number:		Fax:	1	
Email Address:		II		
Interest in Property:				
Property Owner Information	n			
Name:				
Address:			State:	Zip Code:
Phone Number:		Fax:	· ·	
Email Address:				
	h Additional Pages as Necessary)			
Have there been previous ap	peals involving this property?		Yes	No
Please describe the nature of	the previous appeal(s).		· ·	
	equesting an Appeal. Reference sec the Building Code or Building Offici		idling Code from	which relief is sought. Outline
Required Items				

Prior to 30 Days before next scheduled regular meeting of the Construction Board of Appeals the applicant is required to file 10 copies of plans containing the following items with the Clerk's Office:

□ Application fee (\$400)

D Plans drawn to scale showing shape, dimension, construction materials, and method of construction. Plans will clearly and accurately depict the portion of the proposed structure/facility on which the appeal is based.

Additional infromation/reports (i.e. accredited testing agencies and/or authoritative agencuies recognized by the International Council Code, as well as enginereeing practices.

				Application	for Appeal			
photographs, structure or t	, evidence tł he like will p	nat you hav provide a be	e discussed yo etter basis for re	our appeal with yo eview and unders	our neighbors, detail standing of your app	led plans beal. Fail	s, examp lure to pr	ur appeal. Information such as les of the type of building, ovide adequate specifics and ore the Construction Board of
sought will be of the applica	e sent a noti ant/registere	fication by d agent to	mail fifteen (15 appear before t) days prior to the	e CBA meeting. A n duled shall be justify	otice wil	l also be	or which an appeal is being published in the paper. Failure ismissal of the case, without
Owner's Aff	idavit							
-	nd data are	•	•	ays that the foreg prrect to the best o		nd answe	ers herei	n contained and supporting
Signature:							Date:	
Subscribed and sworn to before me this:					Day of			
Notary Public	Name:					County c	of:	
With Commis	sion to expir	e on:			•		•	
Applicant S	ignature							
I/We do herel	by swear tha	t the above	stated informat	tion is accurate an	nd complete.			
Name:								
Signature:							Date:	