

NO. \_\_\_\_\_

**APPLICATION FOR RE-ZONING  
CITY OF FENNVILLE**

Date Received: \_\_\_\_\_

By: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

1. Legal description of subject property (Tax No., plat and lot, or metes and bounds description): \_\_\_\_\_  
\_\_\_\_\_

2. Size and general location of property (acreage, dimensions, streets, street number, or nearest landmark): \_\_\_\_\_  
\_\_\_\_\_

3. Present improvements on the property (buildings, other structures): \_\_\_\_\_  
\_\_\_\_\_

4. Nature of applicants interest in the property deed holder, option, land contract purchase, tenant, other: \_\_\_\_\_

5. If applicants interest is other than deed holder, does the deed holder know of this application and consent thereto? Yes \_\_\_\_\_ No \_\_\_\_\_

6. The following private restrictions encumber the property (if none, so state) otherwise list such restrictions or attach a copy. \_\_\_\_\_  
\_\_\_\_\_

7. The purpose of the rezoning is to use the property as follows: (description of operations and construction, if any) \_\_\_\_\_  
\_\_\_\_\_

8. Will the proposed rezoning be in compliance with the City of Fennville Land Use Plan? Yes \_\_\_\_\_ No \_\_\_\_\_  
(If no, a petition to amend the Land Use Plan will be required as part of this application)

9. It is hereby requested that the foregoing described property be rezoned:  
FROM: \_\_\_\_\_ TO: \_\_\_\_\_

NAME OF APPLICANT (Printed or Typed): \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: Work \_\_\_\_\_ Home \_\_\_\_\_

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**FOR OFFICIAL USE ONLY:**

DATE APPROVED: \_\_\_\_\_ REASONS: \_\_\_\_\_  
DATE REJECTED: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF CHAIRPERSON

\_\_\_\_\_  
DATE