



PETITION FOR AN ADMINISTRATIVE APPEAL
AU TRAIN TOWNSHIP ZONING BOARD OF APPEALS
PO Box 33, Au Train MI 49806 Phone: (906)892-8265
www.austraintownship.org

Please print or type:

Applicant's Name: _____ Phone: _____

Applicant's Address: _____ E-Mail: _____

Property Address: _____

Parcel Number: 02 - 001 - _____ - _____ - _____ Zoning District: _____

Owner's Name: _____ Phone: _____

Owner's Address: _____ E-Mail: _____

Ordinance Section Number(s) Relative To This Appeal: _____

Provide a Brief Description of Your Request: _____

Decision. In exercising this power, the Zoning Board of Appeals may reverse or affirm, wholly or partly, or may modify an order, requirement, decision or a determination being appealed and may make an order, requirement, decision or determination as it should be made. The Zoning Board of Appeals may reverse an order of an administrative official or the Planning Commission only if it finds that the action or decision appealed meets one (1) or more of the following requirements:

1. Was arbitrary or capricious.
2. Was based on an erroneous finding of a material fact.
3. Constituted an abuse of discretion.
4. Was based on erroneous interpretation of the Township Zoning Ordinance or the Michigan Zoning Enabling Act.

Describe in detail how this petition meets one (1) or more of the above requirements (attach additional sheets as necessary):

A filing fee of \$250.00 must be submitted along with this completed form, all related documentation, including a copy of the site plan. *Incomplete applications will not be scheduled for a hearing.*

NOTE: You or your authorized agent must be present at the hearing to present your appeal. You will be notified as to date and time. Your neighbors within 300 feet will also be notified concerning your hearing.

Property Owners Certification

I hereby certify that I am the owner of the above-described property and have authorized the applicant to seek this appeal on my behalf (if applicable). I further understand that conditions and restrictions may be placed upon this property by the Au Train Township Zoning Board of Appeals and hereby agree to conform to and abide by any and all such conditions.

I further agree and authorize representatives from Au Train Township to enter onto my property in order to review the particulars of my request, by giving proper notice, to my contact information provided above, should the need arise.

Property Owner's Signature: _____ Date: _____

FOR TOWNSHIP USE ONLY

Date Received: _____
By: _____
Paid: _____ Check# _____