

No. \_\_\_\_\_

**APPLICATION FOR RE-ZONING  
ROSS TOWNSHIP, KALAMAZOO COUNTY, MICHIGAN**

- 1. Legal description of property (Plat & Lot or Metes & Bounds description): \_\_\_\_\_  
\_\_\_\_\_
- 2. Zoning classification: \_\_\_\_\_
- 3. Size and location of subject property (acreage, dimensions, street number or nearest landmarks, etc.): \_\_\_\_\_  
\_\_\_\_\_
- 4. Present improvements on the property (buildings or other structures, etc.): \_\_\_\_\_  
\_\_\_\_\_
- 5. Applicant's interest in the property (title holder owner, land contract, purchaser, tenant, lessee, etc.): \_\_\_\_\_  
\_\_\_\_\_
- 6. If applicant's interest is other than title holder, does the title holder know of this application and consent to its submittal? \_\_\_\_\_ YES \_\_\_\_\_ NO
- 7. Indicate any restrictions which encumber the property (plat restrictions, etc.). If "none", please state "none": \_\_\_\_\_  
\_\_\_\_\_
- 8. State present use of property: \_\_\_\_\_  
\_\_\_\_\_
- 9. The purpose of the re-zoning is to use the property as follows: \_\_\_\_\_  
\_\_\_\_\_
- 10. Does a site plan accompany the application? \_\_\_\_\_ YES \_\_\_\_\_ NO
- 11. It is hereby requested that the foregoing described property be re-zoned from \_\_\_\_\_  
to \_\_\_\_\_

Name of Applicant (Printed or typed): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_  
 Signature of Applicant/Agent: \_\_\_\_\_

**For Official Use Only:**

Date Received: \_\_\_\_\_ By: \_\_\_\_\_ Fee Paid: \_\_\_\_\_  
 Approved/Rejected: \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditions: \_\_\_\_\_  
 Reasons: \_\_\_\_\_