

**ZEELAND CHARTER TOWNSHIP**

6582 Byron Rd, Zeeland MI 49464

Telephone: (616) 772-6701 Fax: (616) 772-1857

Email: [info@zeelandtwp.org](mailto:info@zeelandtwp.org)

**ZONING BOARD OF APPEALS MEETING REQUEST FORM**

Date of Request: \_\_\_\_\_ Date of Hearing: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Property address for which variance use is requested:

\_\_\_\_\_

Parcel number for which variance use is requested: 70-17- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Type of variance requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The Board of Appeals meets the 4<sup>th</sup> Tuesday of the month.

**Please submit the following information 17 days in advance of the meeting:**

- 1. \$350 fee (for a meeting held on the 4<sup>th</sup> Tuesday of the month.)

**OR**

- \$500 fee (for a special meeting held on a date other than the 4<sup>th</sup> Tuesday of the month.)

- 2. **9 Copies** of the site plan.

\_\_\_\_\_  
Signature of Applicant