

## Application for Zoning Ordinance/Master Plan Amendment

3275 Central Blvd., Hudsonville, Michigan 49426-1450, 616.669.0200 fax 616.669.2330

It is <u>STRONGLY</u> recommended that any application that must go before the Planning Commission for approval be submitted to the City at least six (6) weeks in advance of the next regular meeting. This lead time is necessary to provide an adequate review period of the application materials for compliance with applicable codes, requirements and regulations, and to publicly post the meeting in accordance with State law (when applicable). The Planning Commission meets on the third (3<sup>rd</sup>) Wednesday of every month at 7:00 p.m., with the exception of December.

**NO** application will be placed on a Planning Commission agenda until it has been determined by staff to meet **ALL** applicable codes, requirements, and regulations. As such, there is no guarantee that an application will be placed on the next regularly scheduled meeting agenda, even if submitted six (6) weeks in advance. It is the applicant's responsibility to modify (as requested by staff) and resubmit application materials in a timely matter.

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	Master Plan (map): Master Plan (text): Zoning Ord. (map): Zoning Ord. (text):	\$375 plus engineering, legal, and o	ther professional costs ther professional costs				
Attendance by the owner or owner's representative is required at all Planning Commission or City Commission meetings at which this request is considered.							
Date:		Application Number:	-				
Base Fee:		PPN:					
APPLICANT:							
Address:							
Telephone:		Email Address:					
OWNER OF PROPERTY (if different than applicant):							
Address: —							
Telephone:		Email Address:					

## **AMENDMENT INFORMATION:**

Amendment to:	Zoning Ord	inance		Master Plan	
Type of Amendme	nt requested:	Text ——	Z	oning District/Map	
If the desired zonii precise working of t					e, please indicate the e affected:
If the desired zoning	g amendment is	s for a district/ma	ap change, the	following informatio	n shall be submitted:
Address, Parcel Nu	umber, and Leg	gal description c	of property to be	e rezoned:	
Current zoning class	ssification/mast	ter plan designa	ation of subject	property:	
Proposed zoning c	lassification/ma	aster plan desig	nation of subje	ct property:	
Reasons for reque	sting a zoning o	district/master p	olan designation	n change:	
I do hereby submirengineering, lega					d understand that <b>all</b>
I also authorize the	Planning Com	nmission and Ci	ty Staff to acce	ss the property for	inspection purposes.
The answers and and correct to the b			and the inform	ation submitted are	e in all respects true
Applicant's Name (	Please Print)		Applicar	nt's Signature	
 Date					