Elk Rapids Township, Antrim County, Michigan Planning Commission APPLICATION

Second .

ApplicantJesse and Susan Reiter	Agent Wilhelm Landscapes Robert Wilhelm
(Property Owner)	
Address 6136 Winters Trail	Address 6243 M 72
City – State – Zip Code Kewadin, MI 49648	City – State – Zip Code Williamsburg, MI 49690
Phone / Cell 248-917-3731	Phone / Cell231-267-9267
Fax Number	Fax Number
Email_jreiter@abclawcenters.com	

INSTRUCTIONS

For your reference, the Elk Rapids Township Zoning Ordinance is on-line at http://www.elkrapids.com/Township

The Planning Commission regularly meets on the third Tuesday evening of the month as scheduled at the Government Center, 315 Bridge St. in Elk Rapids. Applicants desiring a public hearing must submit this completed Application accompanied by any other required documentation and the Hearing Fee no later than 45 days prior to a Planning Commission meeting.

Applications should be delivered to either:

Elk Rapids Township Zoning Administrator 315 Bridge St., P.O. Box 365 Elk Rapids, MI 49629-0365

or

Elk Rapids Township Clerk 315 Bridge St., P.O. Box 365 Elk Rapids, MI 49629-0365

The Fee Schedule for Planning Commission hearings, per Township Board Resolution 98-07 is:

	REGULAR MEETING	SPECIAL MEETING
Rezoning Application (PC)	\$ 200.00	\$ 500.00
Special Exception Application (PC)	250.00	500.00
Site Plan Review (PC) & Site Plan Modification (PC)	200.00	500.00
Non-Conforming Use Upgrade (ZBA/PC)	100.00	200.00
Planned Development Zone (PC)	50.00/acre or (\$200.00 min)	175.00/acre or (\$300.00 min)

Applicants seeking a formal Site Plan Review Hearing are advised to study the complete text contained in the Elk Rapids Township Zoning Ordinance Chapter 17, and Parking & Loading Requirements in Chapter 14.

Except for plans in the Single and Two Family Zones, a copy of the proposed Site Plan must be provided to the Elk Rapids Township Emergency Services Departments as listed on the Elk Rapids Township Web Site for review.

5A. Action Requested

	xSpecial Exception - Special Use Permit	
	Rezoning Request	
Michigania	Site Plan Review for:	
	Commercial Zone Planned Development Zone	
	Manufacturing Zone Multiple Family (R-3) Zone	
	Environmental Zone Agricultural Zone	
and the second s	Modifications to Previously Approved Site Plan	
	Approval Date of Previous Site Plan	
w00000000	Other	
*		
Prop	erty Information	
1.	Present Zoning Classification R1 Property Tax # 05-06-003-023-00	
2.	Present Use residential Physical Address 6136 Winters Trail	
3.	If property is platted, name of Plat and Lot #: N 190 ft. of S 590 ft. of Gov Lots 6 and 7 w of hwy 31	
4.	If unplatted, Legal Description of property affected by this request. Attach a complete property description with this application.	
5.	Are there any deed or plat restrictions affecting this parcel of property?Yes No. If Yes, attach a copy of these restrictions with this application.	
6.	Names and addresses of all persons and/or firms other than yourself having a legal interest in the business and/or land.	
7.	Attach ten (10) copies of the Site Plan including dimensioned location and size of existing and proposed buildings, property size, and all other pertinent information per Zoning Ordinance Chapter 17, Sections 17.01 - 17.11.	
8.	What public utilities are available or in use at this property?	
9.	List any other Authorities which may have jurisdiction or overlapping interest in this proposed project: (i.e. El Rapids Village or adjacent Township, MDEQ, Antrim County Health Department or Soil Erosion Department U.S. Corps of Engineers, etc.)	

C.		Describe the proposed Use or Structural changes that make Planning Commission Review necessary:		
	-	Install boulder retaining wall to support erosion of existing land.		
	-			
	-			
D.	Pos	ssible positive impacts of this proposal on the surrounding properties and the vnship:		
		maintain the value of the existing property, stop the erosion of the client's property.		
	-			
	-			
	-			
	-			
	-			
pences pences senses 45	Pos	ssible negative impacts of this proposal on the surrounding properties:		
	_			
	-			
	-			

F. AFFIDAVIT 4 The undersigned acknowledges that if a change is granted or other decisions affecting the property represented by the undersigned are reached by the Planning Commission, the said decision does not relieve the applicant from compliance with all other provisions of the Township Zoning Ordinance. The undersigned further affirms that he/she is or they are the: owner(s) X authorized agent of the owner of the property involved in the appeal, (owners MUST sign) and that the answers and statements herein contained and the information herewith submitted are in all respects true and correct to the best of the knowledge and belief of the undersigned. 12/13/17 (date) (owner) (date) G. PERMISSION TO ENTER PROPERTY I / We herewith grant permission for members of the Elk Rapids Township Planning Commission and the Zoning Administrator to enter my lot(s) / property for the purpose of investigating the scope and effect of this request. Robert Wilhelm Wilhelm Landscapes 12/13/17 Agent (Signature) (Date) (Title) H. ATTACHMENTS:

Property Description

Assignment of Agent

Plat or Deed restrictions

Hearing Fee

Site Plan

Other