## LESLIE PETITION FOR AMENDING THE ZONING ORDINANCE

TO:	
<ul><li>□ Leslie City Council</li><li>□ Leslie Planning Commission</li></ul>	
FROM:	
	For Office Use Only
(petitioner)	Date Rec'd.
	Effective Date:
	Fee Rec'd.
(address)	Receipt number:
	Hearing date:
(city, state, zip code)	Leslie Planning Commission:
(orty, state, zip sode)	Action:
	Date:
(telephone, home and business)	Leslie City Council:
	Action:
	Date:
	Notice of Adoption date:
	Case number:

<u>Please note</u>: All questions must be answered completely. If additional space is needed, number and attach additional sheets.

## **ACTION REQUESTED**

The petitioner requests Leslie approve the following petition for a zoning amendment. This petition is for a text amendment "A" or a change to the zoning map "B" or both.

- Fill out pages 1, 2 and 4 of this application for A (text amendment).
- Fill out only pages 1, 3 and 4 for B (change the zoning map).
- Fill out pages 1, 2, 3 and 4 for both.
- If this is a multiple request, duplicate page 2 or 3, as many times as necessary, so one copy is used for each requested change.
  - □ A. Zoning Text change.
  - □ B. Zoning Map change.
  - A&B. Both Zoning Text & Map change.

NOTE: The amendment may be adopted as proposed, further revised or not adopted.

	nominated for a text change.	
The o	request is to change the text of section (§)	_
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		_
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	□ attached, additional sheets if necessary.	
Why,	what is the purpose, of the proposed zoning text change?	
Why,	what is the purpose, of the proposed zoning text change?	

B.	Map change (rezoning): Use another copy of this page for each different area being nominated for rezoning.
This re	equest is to rezone land from:
	PERTY INFORMATION: Description of land to be rezoned:
	□ attached, additional sheets if necessary. □ attach copy of map showing proposed change.
Prope	rty size:
Parce Addre	rty size:
	□ attached, additional sheets if necessary.
A ( )	
Attacr	or list all deed restrictions for the property at question:
	□ attached, additional sheets if necessary
	ames and address of all other persons, firms, or corporations having a legal or equitable st in the property at question:
_	
	□ attached, additional sheets if necessary
	rea isunplatted, platted, will be plated. If platted, name of plat: is the present use of the property?

## STATEMENT TO JUSTIFY THE PROPOSED AMENDMENT: State specifically the reason for the proposed amendment at this time: Will the zoning amendment conform with the City of Leslie Master Plan? Explain how: If the zoning amendment does not conform with the land use plan, why should the change be made, or why should the land use plan also be amended to accommodate this proposed zoning amendment. Be specific, brief, and document statements. Indicate if the existing zoning is in error, or if conditions have changed to warrant amending the zoning ordinance: □ Attached, more data. What will the impacts of the zoning amendment anticipated to be on all landowners in the zoning district affected by the amendment? \_\_\_\_\_ WHAT ARE THE NUMBER OF ATTACHED SHEETS: List and describe them: (add more lines if needed) The undersigned affirms that s/he is the agent representing the applicant requesting the zoning change and that the answers and statements contained here are true. Signed:

When completed send **two** copies to:

Date: \_\_\_\_\_

Leslie Planning Commission Leslie City Hall 602 W. Bellevue Leslie, Michigan 49251