

**Official Use Only**

Variance No. \_\_\_\_\_  
Project Name \_\_\_\_\_

Date Received \_\_\_\_\_  
Received By \_\_\_\_\_  
Action/Date \_\_\_\_\_

---

**TOWNSHIP OF MORAN  
ZONING ADMINISTRATOR  
PO BOX 364  
ST. IGNACE, MI 49781**

**VARIANCE APPLICATION**

A. Applicant: \_\_\_\_\_  
Address of applicant: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Interest in property (circle one):    Owner            Tenant            Option            Other

B. Site address/location: \_\_\_\_\_  
Current zoning district: \_\_\_\_\_  
Legal description (attach if necessary): \_\_\_\_\_  
\_\_\_\_\_

C. Nature of Request:

- Request for variance (s)
- Request for interpretation of provision (s) of Chapters of the Zoning Ordinance.
- Review an order, requirements, decision or determination of a Township official charged with interpreting or enforcing provisions of Chapters of the Zoning Ordinance.

Details of request (attach if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. Supporting Material (check if attached)

- Site plan \_\_\_\_\_
- Proof of property interest \_\_\_\_\_
- Architectural sketches \_\_\_\_\_
- Property survey \_\_\_\_\_
- Other \_\_\_\_\_

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Fee

\_\_\_\_\_  
Received by and date

“UNDER WHAT CONDITIONS WILL A VARIANCE BE GRANTED. SEE ZONING ORDINANCE SECTION 24.05”