

**CITY OF NEWAYGO**  
**Application for Ordinance Amendment**

Date: \_\_\_\_\_ Permit #: \_\_\_\_\_ Fee: \$400.00

- |                                                                                                                                                                    |                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. <b><u>Applicant Information:</u></b> (if not individual, list business)</p> <p>Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p> <p>Email: _____</p> | <p><b><u>Owner Information:</u></b> (if different from applicant)</p> <p>Name: _____</p> <p>Address: _____</p> <p>Phone: _____</p> <p>Email: _____</p> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|

2. Application is for:                    (    ) Rezoning (Zoning Map)            (    ) Text Amendment

3. Address of Property Involved: \_\_\_\_\_

4. Property Tax Id Number: \_\_\_\_\_

5. Current Use(s) of Property: \_\_\_\_\_

6. Current Zoning Classification:
- |                                        |                                      |
|----------------------------------------|--------------------------------------|
| (    ) R-1 Single Family Residential   | (    ) B-1 General Business District |
| (    ) R-2 Single & Two Family Resid.  | (    ) B-2 Highway Business District |
| (    ) R-3 Multiple Family Residential | (    ) I-1 Industrial District       |
| (    ) MHP Mobile Home Park            | (    ) Other: _____                  |

7. Proposed Zoning Classification:
- |                                        |                                      |
|----------------------------------------|--------------------------------------|
| (    ) R-1 Single Family Residential   | (    ) B-1 General Business District |
| (    ) R-2 Single & Two Family Resid.  | (    ) B-2 Highway Business District |
| (    ) R-3 Multiple Family Residential | (    ) I-1 Industrial District       |
| (    ) MHP Mobile Home Park            | (    ) Other: _____                  |

8. Zoning district setback requirements
- |                                     |                        |                 |
|-------------------------------------|------------------------|-----------------|
| One side yard from property line    | Min. Required _____ft. | Actual _____ft. |
| Second side yard from property line | Min. Required _____ft. | Actual _____ft. |
| Front yard from road right-of-way   | Min. Required _____ft. | Actual _____ft. |
| Rear yard from property line        | Min. Required _____ft. | Actual _____ft. |

9. List of reasons for the request:

\_\_\_\_\_

\_\_\_\_\_

10. Attach site plan. Also attach building elevations, pictures, brochures, etc.

11. I/we do hereby swear that the above information is true and correct to the best of my/our knowledge and agree to comply with remaining ordinances and regulations of the City of Newaygo, Newaygo County, MI and of any other agencies or governmental units which may be involved.

_____	_____	_____	_____
Applicant	Date	Applicant	Date

**PLEASE ENCLOSE TWELVE (12) COPIES OF THE PROPOSED SITE USE PLAN**

**PLANNING COMMISSION REVIEW**

A. Consistent with land use objectives: \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, list the areas, by reference number, that do not comply: \_\_\_\_\_

\_\_\_\_\_

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**PLANNING COMMISSION ACTION**

Date of Meeting: \_\_\_\_\_

The attached application for ordinance amendment is recommended for:

( ) Approval                      Reasons/Conditions: \_\_\_\_\_

\_\_\_\_\_

( ) Denial                      Reasons: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_  
Planning Commission Secretary, City of Newaygo

\_\_\_\_\_  
Zoning Administrator, City of Newaygo

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**CITY COUNCIL**

Date of Meeting: \_\_\_\_\_

City Council Action:

The attached application for ordinance amendment is hereby:

( ) Granted                      Reasons/Conditions: \_\_\_\_\_

\_\_\_\_\_

( ) Denied                      Reasons: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_  
City Clerk, City of Newaygo

\_\_\_\_\_  
Zoning Administrator, City of Newaygo

Copy Distribution:      Original - City of Newaygo  
                                    Copies – Applicant, Assessor and/or Building Inspector