

# ZONING BOARD OF APPEALS NON-USE VARIANCE APPLICATION

## Applicant Information

Name of Applicant: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Legal Interest: ☐ Property Owner ☐ Lessee/Tenant  
☐ Purchaser by Option, Purchase Agreement, or Land Contract

## Owner Information (☐ Same as Applicant)

Owner of Record: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Agent Information

Name of Agent: \_\_\_\_\_

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Zoning Information

Parcel Address: \_\_\_\_\_ Parcel ID No: \_\_\_\_\_

Current Legal Use: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Describe the requested variance and list the applicable section(s) of the Zoning Ordinance. (☐ See attachment)

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

### Staff Use Only

Case No: \_\_\_\_\_

Materials Rec'd: \_\_\_\_\_

Receipt No: \_\_\_\_\_

☐ Residential

☐ Non-Residential

Mtg. Date: \_\_\_\_\_

Action: \_\_\_\_\_

Track No: \_\_\_\_\_

### Property Owner and Authorized Agent Affidavits

See Page 5 for the Property Owner Affidavit, this must be completed when the applicant is not the property owner of record.

See Page 6 for the Authorized Agent Affidavit, this must be completed for any person(s) acting on applicant's behalf.



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## Variance Review Standards (☐ See attachment)

The below standards are used to review the proposed non-use variance. All five standards must be met for approval. Per the City of Flint Zoning Ordinance, §50-196 Variance Procedures:

**1. Practical Difficulty.** That compliance with the strict letter of the Zoning Ordinance governing area, setback, frontage, height, bulk, lot coverage, density or other dimensional standards will unreasonably prevent the owner from using the property for a permitted purpose or will render conformity with such restrictions unnecessarily burdensome.

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**2. Unique Circumstances.** That the plight is due to unique circumstances of the property and does not apply generally to the same zone district or to general neighborhood conditions.

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**3. Not Self-Created.** That the need for the variance was not created by the applicant or the applicant's predecessors in title.

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**4. No Substantial Detriment.** That the variance shall not cause substantial detriment to adjacent property and the surrounding neighborhood.

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**5. Consistency with Comprehensive Plan/Zoning Ordinance.** That the variance shall be consistent with, and not materially impair, the purpose and intent of the Comprehensive Plan and Zoning Ordinance.

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# ZONING BOARD OF APPEALS NON-USE VARIANCE APPLICATION

## Required Information for Submittal

- ☐ This application with complete information, neatly written, and signed by all applicable parties.
- ☐ Application fee payment. (Check, Cash, Card, Online – Confirm with staff)
- ☐ Complete responses to all Non-Use Variance Review Standards.
- ☐ Proof of Ownership
  - ☐ Deed, Purchase Agreement, Option, Land Contract, etc.
  - ☐ Notarized Authorized Agent Authorization Form (if applicable)
- ☐ Development Plan (if applicable)
  - Must be signed and sealed if the request relates to a Zoning Coordinator Review, Special Land Use, Additionally Regulated Use, or other review requiring plans from an architect, engineer, or surveyor licensed by the State of Michigan.
  - Might require floor plans or elevations, depending on the request.
  - Twelve (12) hard copies, minimum Arch C (18" x 24"), one (1) digital copy.
- ☐ Plot Plan (if applicable)
  - Drawn layout of the property including buildings, fencing, walkways, driveways, and/or any other pertinent information. May be completed by the applicant so long as the drawing is neat and legible.
  - Might require floor plans or elevations, depending on the request.

## Additional Information for Submittal

- ☐ Property History
  - Narrative of the history of the property, including a timeline of previous uses, previous development approvals, ownership history, etc.
- ☐ Business plans, operation plans, hours of operation, and any other information that describes how the use would be operated on the property.
- ☐ Pictures of the property, building(s), etc.
- ☐ Evidence of neighborhood outreach, such as attendance sheets from meeting(s) with residents of the surrounding neighborhood, correspondence distributed, and letters of support.
- ☐ Any other information pertaining to the requested variance that may be helpful for review.

In the course of reviewing the application, the Zoning Coordinator may request additional information from the applicant, where the information is necessary to complete the review.



# ZONING BOARD OF APPEALS NON-USE VARIANCE APPLICATION

## Applicant Confirmation

The applicant must read the following statement carefully and sign below:

The undersigned requests that the City of Flint review this application and related required documents and plans as provided in Article 17 of the City of Flint Zoning Ordinance. The applicant affirms and acknowledges the following:

- That the applicant has a legal interest in the property described in this application.
- That the answers, statements, and documents contained in this application and enclosures are in all respects true and correct to the best of their knowledge.
- That the approval of this application does not relieve the undersigned from compliance with all other provisions of the Zoning Ordinance or other codes or statutes.
- That the applicant will comply with any and all conditions imposed in granting an approval of this request.
- That any decision of the Board favorable to the applicant will remain valid only as long as the information or data relating thereto are found to be correct and the conditions upon which the decision was based are maintained.
- If also the owner, the applicant grants the City of Flint staff and the Zoning Board of Appeals the right to access the subject property for the sole purpose of evaluating the application.

\_\_\_\_\_  
Applicant Name (printed)

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

\_\_\_\_\_  
Date

## Owner Confirmation (☐ Not applicable)

If the applicant is not the property owner, the owner must read the following statement carefully and sign below:

The undersigned affirms and acknowledges they are the owner(s) of the property described in this application, and:

- Is/are aware of the contents of this application and related enclosures.
- Authorizes the applicant and their agent, if applicable, to submit this application and represent the undersigned in the matter being reviewed by the City of Flint.
- Grants the City of Flint staff and the Zoning Board of Appeals the right to access the subject property for the sole purpose of evaluating the application.

\_\_\_\_\_  
Property Owner Name(s) (printed)

\_\_\_\_\_  
Property Owner Signature(s)

\_\_\_\_\_  
Date



# ZONING BOARD OF APPEALS PROPERTY OWNER AFFIDAVIT

State of Michigan }  
County of Genesee } ss.

(☐ Not applicable)

I (we) \_\_\_\_\_, after being first duly sworn, depose and say:  
Property Owner Name(s) (printed)

1. That I/we are the owner(s) of real estate located at \_\_\_\_\_.  
Street Address and Parcel Identification Number (PID)
2. That I/we have read and examined the application, and are familiar with its contents.
3. That I/we have no objection to, and consent to such request as set forth in the application.
4. Such request being made by the applicant (☐ is) (☐ is not) a condition to the sale or lease of the above referenced property.

\_\_\_\_\_  
Property Owner Signature(s)

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year

\_\_\_\_\_  
Notary Name (printed)

\_\_\_\_\_, Notary Public  
Notary Signature

My commission expires: \_\_\_\_\_

County of Residence: \_\_\_\_\_



# ZONING BOARD OF APPEALS AUTHORIZED AGENT AFFIDAVIT

State of Michigan }  
County of Genesee } ss.

(☐ Not applicable)

I (we) \_\_\_\_\_, after being first duly sworn, depose and say:  
Applicant Name (printed)

1. That all statements herein contained and the information provided in the attached application, plans, and other exhibits are in all respects true and correct to the best of my knowledge.
2. That I hereby authorize the following people to represent my interests regarding this application and to appear on my behalf before any administrative or legislative body in the City considering this application and to act in all respects as our agent in matters pertaining to the attached application.

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Authorized Agent Name (printed)

\_\_\_\_\_  
Authorized Agent Name (printed)

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

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
Day Month Year

\_\_\_\_\_  
Notary Name (printed)

\_\_\_\_\_, Notary Public  
Notary Signature

My commission expires: \_\_\_\_\_

County of Residence: \_\_\_\_\_



# ZONING BOARD OF APPEALS NON-USE VARIANCE APPLICATION PROCESS

| NON-USE VARIANCE APPLICATION PROCESS |   |
|--------------------------------------|---|
| <b>Step 1</b>                        | <ul style="list-style-type: none"> <li>Applicant(s) meets with Zoning staff to discuss the project.</li> </ul>  |
| <b>Step 2</b>                        | <ul style="list-style-type: none"> <li>Applicant(s) submits a complete application with all supporting materials.</li> </ul>  |
| <b>Step 3</b>                        | <ul style="list-style-type: none"> <li>Staff reviews the application for completeness. (5 business days)</li> <li>If there are any incomplete items, staff sends a response to the applicant(s) indicating deficient materials.</li> </ul>  |
| <b>Step 4</b>                        | <ul style="list-style-type: none"> <li>Staff sets a public hearing for the next available meeting.</li> <li>Staff notices the public hearing at least 15 days prior in the Flint Journal Legal-Ads and sends mailers to residents and property owners within a minimum of 300 ft. from the property.</li> </ul> |
| <b>Step 5</b>                        | <ul style="list-style-type: none"> <li>Staff analyzes the application and materials and creates a report with findings.</li> <li>Staff sends the report to the ZBA and applicant(s) prior to the meeting date.</li> </ul>   |
| <b>Step 6</b>                        | <ul style="list-style-type: none"> <li>Applicant attends the public hearing.</li> <li>Zoning Board of Appeals votes to approve, approve with conditions, deny, or table the request for another date.</li> </ul>  |

## Submission

Completed applications may be submitted via email, mail, or drop-off.

Email: [cof-zoning@cityofflint.com](mailto:cof-zoning@cityofflint.com)

Phone: (810) 766-7426

Address: Flint City Hall, Zoning Division

1101 S. Saginaw St.

Flint, MI 48502

In authorizing a variance, the Board may attach conditions regarding the location, character and other features of the proposed structure or use as it may deem necessary in the interest of the furtherance of the purposes of Chapter 50 and in the public interest, and may require a guarantee or bond to insure that the conditions imposed are being and will continue to be complied with.

Variance approval is valid for one year from the date of approval. If the applicant has not pulled a building permit to construct the structure authorized by a non-use variance within this time the variance approval shall expire. If a building permit is issued within a year of the variance approval, but the structure is not completed before expiration of the building permit and the permit is not extended, the variance approval shall expire.

Any persons having an interest affected by a decision of the Zoning Board of Appeals shall have the right to appeal to the circuit court on questions of law and fact.

