## CITY OF SOUTHFIELD LAND REZONING APPLICATION

## **City of Southfield Planning Department Date Submitted:** 26000 Evergreen Road Southfield, MI 48076 **Reference Number:** Telephone: 248-796-4150 Fax: 248-796-4105 **Sidwell Number:** E-mail: contactplanning@cityofsouthfield.com **Associated Site Plan File** Number (if applicable): NOTICE TO THE APPLICANT: Petitions must be filed with the Planning Office by 12:00 noon 40 calendar days prior to being placed on the Planning Commission agenda. I (We) the undersigned do hereby make application to the Planning Department of the City of Southfield to develop the property herein described. 1. Existing Zoning District: Proposed Zoning District: Description of the Subject Property:\_\_\_\_ 2. Address: Nearest Cross Streets: Acreage: 3. We attach a statement hereto indicating why, in our opinion, the change requested is necessary for the preservation and enjoyment of substantial property rights, and why such change will not be detrimental to the public welfare, nor the property of other persons located in the vicinity thereof. Value of development: \$\_\_\_\_\_ 4. 5. APPLICANT INFORMATION 6. PROPERTY OWNER INFORMATION Company Company Name Name Address Address City State Zip City State Zip Email Email Phone Phone 7. Applicant's interest in the property (if other than owner) 8. Signature of Applicant\_\_\_\_\_\_\_Date\_\_\_\_\_

## **Supplemental Forms:**

- Rezoning Flow Chart
- Community Impact Statement (if determined by the Planning Department)
- Overlay Development District/Residential Unit Development District Review Checklist (ODD/RUDD requests only)

9. Signature of Property Owner Date

Overlay Development District/Residential Unit Development District Development Agreement Template (ODD/RUDD requests only)