

Discover  
**PENTWATER**  
STAY FOR A DAY, A WEEK, A LIFE



Village of Pentwater  
65 S Hancock St  
PO Box 622  
Pentwater, MI 49449  
231-869-6301

## Rezoning Application

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Phone

Applicant's Capacity if not Property Owner (Circle One):

\_\_\_\_\_  
Builder

\_\_\_\_\_  
Agent

\_\_\_\_\_  
Option to Purchase

\_\_\_\_\_  
Other

\_\_\_\_\_  
Property Owner

\_\_\_\_\_  
Property Address

\*\*\*Attach Legal Description

\_\_\_\_\_  
Parcel Number

Zoning District: R\_\_\_

C\_\_\_

MHP

RR

PUD

RO

LI

\_\_\_\_\_  
Current Use

\_\_\_\_\_  
Current Structure on Lot Yes No

\_\_\_\_\_  
Requested Zoning District

Reason for Request: (attach sheets if necessary)

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

**Attach a site map depicting the property, including lot dimensions and connecting streets/alleys/easements.**

Number of Attached Sheets:

- 1. Legal Description: \_\_\_\_\_
- 2. Action Requested: \_\_\_\_\_
- 3. Site Plan/Sketch: \_\_\_\_\_
- 4. Survey: \_\_\_\_\_
- 5. Other: \_\_\_\_\_
- 6. Total Pages: \_\_\_\_\_

Affidavit: I agree the statements made above are, to the best of my knowledge, true and accurate. Further, I agree to give permission for officials of the Village of Pentwater to enter the property subject to this permit application for purposes of inspection. Also, I understand any zoning action approved for this application conveys only land use rights and does not include any representation or conveyance of rights in any other statute, building code, deed restriction or other property rights.

\_\_\_\_\_  
Signature \_\_\_\_\_ Date

**When completed send to:  
Village of Pentwater Zoning Administrator  
65 S. Hancock Street – P.O Box 622, Pentwater,  
Michigan 49449 Phone: (231) 869-8301  
zoning@pentwatervillage.org**

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

Date Submitted to Planning Commission: \_\_\_\_\_  
(This Form must be distributed to the Planning Commission within 30 days of Receipts)

Date Submitted to Village Council: \_\_\_\_\_