

Fee: \$200

**APPLICATION FOR EXPANSION OF A NONCONFORMING USE
BOARD OF ZONING APPEALS
PORTAGE TOWNSHIP**

The undersigned requests to expand a nonconforming use for the use specified below. Should this application be approved, it is understood that it shall only authorize that particular use described in this application, and any conditions or safeguards required by the Board shall be installed and/or observed.

1. Name of Applicant: _____
Address: _____
Phone Number: _____ Email: _____

2. Location Description: Subdivision Name or Address: _____

Lot Number: _____ Section: _____
(If not in a platted subdivision, attach a legal description)

3. Existing Use: _____

4. Present Zoning Classification: _____

5. Description of Use Requested: _____

6. Supporting Information: Attach a plan of the proposed use showing the locations of buildings, parking and loading areas, traffic access and circulation drives, open spaces, landscaping, utilities, signs, yards, and refuse and service areas. Also, attach a narrative statement relative to the above requirements, and explain any economic, noise, glare, and odor effects on adjoining property and the general compatibility with adjacent and other properties in the district.

DATE APPLICANT SIGNATURE

For Official Use Only
Date filed: _____ Fee Paid: _____
Decision of BZA: Approved: _____ Denied: _____

If approved, the following conditions and safeguards were prescribed:
1. _____
2. _____
3. _____

If denied, reason(s) for denial: _____

DATE BZA CHAIRMAN