



**City of Westland
Planning Commission
36300 Warren -- Westland, Michigan 48185
(734) 467-3219**

APPLICATION FOR REZONING

Application for **Rezoning** from _____ to _____

Applicant's Name: _____ Phone: _____

Address: _____
(Street) (City) (State) (Zip Code)

Complete Description of Property:

Purpose for Request to Rezone: _____

Are you the legal owner of the property? _____ Yes _____ No (If not, legal owner must sign application.)

Signature of Petitioner

Signature of Legal Owner

Print Name

Print Name

Address of Petitioner

Address of Legal Owner

Date: _____

Note: Three (3) typewritten copies of this application should be submitted to the Planning Department at least 25 working days prior to the meeting of the Planning Commission at which it is to be considered. The application must be accompanied by sixteen (16) copies of a site plan (folded to size of 9" x 12") as well as a copy of the plans and any supporting documentation in .pdf format illustrating the site and the proposed use of the property to be rezoned, and a payment in the amount of \$650 for one acre of land or less, or \$850 for land over one acre as fee for rezoning (check made payable to the City of Westland).



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