

**CHARTER TOWNSHIP OF LYON  
REQUEST TO CONSIDER AN AMENDMENT  
TO THE ZONING ORDINANCE TEXT**

**NOTICE TO APPLICANT:** Applications for an Amendment to the Zoning Ordinance Text for review by the Planning Commission must be submitted to the Township *in substantially complete form* at least twenty-one (21) days prior to the Planning Commission's meeting at which the proposal will be considered for scheduling of a public hearing. Regular meetings of the Planning Commission are held on the second Monday of the month at 7:00 p.m. Regular meetings of the Township Board are held on the first Monday of the month at 7:00 p.m. All meetings are held at the Lyon Township Hall, 58000 Grand River Avenue, New Hudson, Michigan, 48165. Phone number: 248-437-2240. Fax number: 248-437-2336.

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**TO BE COMPLETED BY APPLICANT:**

I (We), the undersigned, do hereby respectfully request consideration of our request to amend the text of the Zoning Ordinance and provide the following information to assist in the review:

Applicant: \_\_\_\_\_

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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**Section(s) of the Zoning Ordinance Affected by Proposed Amendment:**

\_\_\_\_\_

Page Number(s) in Current Ordinance: \_\_\_\_\_

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Proposed Text Amendment (attach additional pages, if necessary):

State the reasons why this amendment is necessary:



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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name (Print)

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name (Print)

<b>TO BE COMPLETED BY THE TOWNSHIP</b>		Case #: _____
Date Submitted: _____		Fee Paid: _____
Received By: _____		