



TOWNSHIP OF CLAY

County of St. Clair

4710 Pte. Tremble Road, Clay Township, MI 48001
(810) 794-9320

CLAY TOWNSHIP REZONING APPLICATION

1. Completed application and fees along with **ten (10) copies** of a detailed drawing of the parcel and a **digital copy of the parcel to be rezoned** (including legal description) must be submitted to the Zoning Administrator in the Building Department.
2. Once all of the documents have been received by the Building Department, the digital application will then be forwarded to the Clay Township Planner who will review the documents and notify the Building Department which date the case will be placed on the Planning Commission Agenda. The Clay Township Police Department, Clay Township DPW, Clay Township Assessing Department, and Clay Township Fire Department will be notified of the proposed rezoning and will complete a Department Head Review prior to the meeting.
3. The Rezoning Application requires a Clay Township Planning Commission Public Hearing, review of application by the St. Clair County Planning Commission, and review and approval of application by the Clay Township Board of Trustees. The process of this application could take as long as three months.
4. Planning Commission schedule: * 4th Wednesday of the Month – New Business

Please find attached:

- 1) Application

A Complete Copy Of The Clay Township Zoning Ordinance Can Be Purchased Or
Downloaded From Our Website – www.claytwpmi.gov



CLAY TOWNSHIP

APPLICATION FOR REZONING OF PROPERTY

Clay Township
Building Department
4710 Pte. Tremble Rd.
P. O. Box 429
Algonac, MI 48001
(810) 794-9320

PETITIONER'S NAME: _____ PHONE (____) - ____ - ____

ADDRESS: _____ CITY _____ STATE _____ ZIP _____

EMAIL ADDRESS: _____

PROPERTY TO BE REZONED: Parcel # _____

Address: _____

Lot Number: _____ Land Area (in acres) : _____

Property Frontage: _____ Property Depth: _____

CURRENT ZONING DISTRICT: _____ ZONING DISTRICT REQUESTED: _____

ARE YOU SOLE LEGAL OWNER? YES [] NO [] IF NOT, STATE INTEREST: _____

PRESENT LAND OWNER'S NAME, ADDRESS AND PHONE: _____

ATTACH DRAWING SHOWING THE LOCATION OF THE PROPERTY IN RELATION TO THE NEAREST ROAD(S). DRAWING SHOULD BE IN BLACK INK ON WHITE PAPER AND INCLUDE THE FOLLOWING INFORMATION:

- 1. SIZE AND SHAPE OF PARCEL (INCLUDE PARCEL ID#).
2. SIZE AND GENERAL LOCATION OF BUILDING(S) TO BE INCLUDED.
3. STREET ON WHICH LOCATED AND ACCESS.
4. ADJACENT PROPERTIES, BUILDINGS, AND ZONING DISTRICTS.
5. LEGAL DESCRIPTION.

THE APPLICATION MUST BE SUBMITTED WITH FIFTEEN (15) COPIES OF THE DRAWING OF THE PROPERTY TO BE REZONED.

SIGNATURE OF APPLICANT or OWNER

DATE RECEIVED: _____

APPLICATION FEE: _____