



VILLAGE OF FRUITPORT APPLICATION FOR VARIANCE HEARING

NAME _____
ADDRESS _____
PHONE _____ *PARCEL# _____
DATE _____

LEGAL DESCRIPTION OF PROPERTY*

DESCRIBE VARIANCE REQUESTED

REMIT THIS COMPLETED FORM AND \$300 VARIANCE APPLICATION FEE TO:

**VILLAGE OF FRUITPORT CLERK
45 N 2nd Avenue
FRUITPORT MI 49415**

FOR QUESTIONS CONTACT THE CLERK AT 231-865-3577. *PARCEL NUMBER AND LEGAL DESCRIPTION IS ON TAX BILL OR CAN BE OBTAINED FROM ASSESSOR (231-865-3151).