

**CITY OF GROSSE POINTE WOODS
INTERNAL TRACKING FORM**

1. Applicant: _____
2. Request: _____
3. Fee: _____
4. Dispersed as is Appropriate to the Following Departments for Review and Comments with Recommendations:

	<u>Date Dispersed</u>	<u>Date Report Received</u>
BUILDING & ENGINEERING DEPT.	_____	_____
CITY ATTORNEY (If Applicable)	_____	_____
DEPT. OF PUBLIC WORKS	_____	_____
FIRE DEPT.	_____	_____
PLANNING COMMISSION	_____	_____
POLICE DEPT.	_____	_____
COMMUNITY DEV. DEPT. (If Applicable)	_____	_____

COMMENTS:



Attach a detailed written statement fully explaining your request.

8. Present Use of Property: Vacant

9. Attach an Accurate Drawing of the Site Showing:

- a) Property boundaries
- b) Existing buildings
- c) Unusual physical features of the site or building
- d) Abutting streets
- e) Existing zoning on adjacent properties
- f) Location of buildings on adjacent properties

10. Names and Addresses of all other Persons, Firms or Corporations having a Legal or Equitable Interest in the Property:

Applicant must provide lease, purchase agreement or written authorization from Owner.

DECLARATION:

I, the applicant, do hereby declare that I am the owner, or the authorized agent of the owner, of the above, legally described property on which the request is proposed, and that the answers given herein are true to the best of my knowledge. I understand that if the request is granted, I am in no way relieved from all other applicable requirements of the City of Grosse Pointe Woods Zoning Ordinance.

By virtue of my application, I do hereby declare that the appropriate appointed officials and City staff responsible for the review of my application are given permission to visit and inspect the property regarding my petition in order to determine the suitability of the request.

Applicant Signature: _____  _____ Date: _____

Filing Fee: \$500.00

CITY OF GROSSE POINTE WOODS
20025 Mack Plaza, Grosse Pointe Woods, MI 48236
Phone (313) 343-2440

REZONING APPLICATION

RECEIVED

MAR 01 2024

1. Applicant: Buccellato Development, LLC

Mailing Address: 20259 Mack Ave. Grosse Pointe Woods, MI 48236
Street City Zip

Daytime Phone: (313) 300-7280 Fax: _____

2. Property Owner: Buccellato Development, LLC

Mailing Address: 20259 Mack Ave. Grosse Pointe Woods, MI 48236

Daytime Phone: (313) 300-7280 Fax: _____

3. Project Manager: (required) Stucky Vitale Architects

Mailing Address: 27172 Woodward Ave. Royal Oak, MI. 48067
Street City Zip

Daytime Phone: (248) 546-6700 Fax: _____

Other Phone: _____

4. Address of Property: 20100 Mack Ave. Grosse Pointe Woods, MI.

5. Legal Description of Property: Lot 90, Fairholme No. 1, according to the plat thereof, as recorded in Liber 68 of Plats, Page 84, Wayne County Records.

(or attach a legal boundary description)

6. Permanent Parcel Number: Tax ID: 40-012-05-0090-000

7. Request: To Rezone From: RO-1 Restricted Office To: C Commercial

For the Following Purpose:

Renovation to an Event space as a Special Land Use under Section 50-4.11
Miscellaneous business establishments of the Zoning Ordinance