



CITY OF MADISON HEIGHTS
COMMUNITY & ECONOMIC DEVELOPMENT DEPARTMENT
ZONING BOARD OF APPEALS (ZBA) APPLICATION

I. APPLICANT INFORMATION

Applicant JOHN HADDAD | SPECTRUM NEON
Applicant Address 1280 KEMPAR AVE
City MADISON HEIGHTS State MI ZIP 48071
Interest in Property (owner, tenant, option, etc.) CONTRACTOR
Contact Person JOHN HADDAD
Telephone Number 313.366.7333 Email Address JHADDAD@SPECTRUMNEON.CO

II. PROPERTY INFORMATION (IF APPLICABLE)

Property Address 1485 W 14 MILE RD
Tax ID 44 25 02 102 001 Zoning District B-1 LOC
Owner Name (if different than applicant) JOHNNY SHOLNEYIA
Address 1203 S MAIN ST
City ROYAL OAK State MI Zip 48067.3293
Telephone Number 248.884.8886 Email Address JOHNNYS@HOLIDAY-MARKET.COM

III. CONSULTANT INFORMATION (IF APPLICABLE)

Name _____ Company _____
Address _____
City _____ State _____ Zip _____
Telephone Number _____ Email Address _____

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IV. NATURE OF REQUEST

☒ Dimensional (Non-Use) Variance ☐ Appeal of Administrative Decision ☐ Zoning Text or Map Interpretation ☐ Alteration of Non-Conforming Use

Brief Description of Request

SEEKING SIGNAGE THAT EXCEEDS THE CODE ALLOWANCE OF 150 SQ FT, SITUATED IN THE B-1 DISTRICT

Required Attachments: Refer to ZBA Review Standards Response Form and Checklist (attached).

V. APPLICANT CERTIFICATION

I (we) the undersigned do hereby apply to the City of Madison Heights for review and approval of the above-described Zoning Board of Appeals application. Applicant(s) and the property owner(s) do hereby consent to city staff to assess the property for purposes of evaluating the site for requested action(s). I hereby affirm that all of the information submitted with and including this application are correct and truthful to the best of my knowledge.

Printed Name BHN HADDAD Signature [Signature] Date 7/14/25

VI. PROPERTY OWNER CERTIFICATION

By signing below, I (property owner) understand that the application to the City of Madison Heights has been made for land use matters to be considered and decision made by the Zoning Board of Appeals that will affect use of my property. I hereby affirm that all of the information submitted with and including this application are correct and truthful to the best of my knowledge.

IF YOU ARE NOT THE PROPERTY OWNER, YOU MUST HAVE THE PROPERTY OWNER PROVIDE A NOTARIZED SIGNATURE, BELOW, OR PROVIDE A NOTARIZED LETTER OF AUTHORIZATION OR NOTARIZED POWER OF ATTORNEY AUTHORIZING YOU TO ACT ON THEIR BEHALF.

Printed Name JOHNNY SPOURDELLA Signature [Signature] Date 7-14-25

Notary for Property Owner:

Subscribed and sworn before me, this 14 day of JULY, 2025.

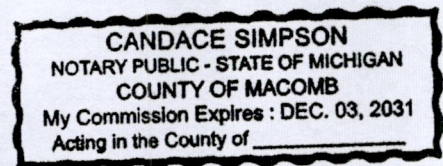
A Notary Public in and for MACOMB County, Michigan.

Notary Name (Print): CANDACE SIMPSON

Notary Signature: Candace Simpson

My Commission Expires: DEC 03, 2031

Notary Stamp



STAFF USE ONLY [DO NOT ACCEPT INCOMPLETE APPLICATIONS]

FILING FEE: \$400

- DIMENSIONAL VARIANCE/NON-CONFORMING USE:
 - Single-Family: \$300
 - Multi-Family/Non-Residential: \$400 + \$300 per additional variance
- Appeal/Interpretation: \$400

ZBA NO.: PZBA # 25-0009

DATE APPLICATION RECEIVED: 7/29/25

RECEIVED BY: OE

SECTION D: DIMENSIONAL (NON-USE) VARIANCE

☒ Check here for a Dimensional (Non-Use) Variance (Section 15.06 of Zoning Ordinance)

1. List Section number(s) from which a variance is requested:

12.07	

2. Provide a description of the proposed work and why the anticipated variances are needed.

SEEKING TO INSTALL 3 WALL SIGNS AND 2 WALL LOGOS.
DUE TO BRANDING SPECIFICATIONS AND TYPE OF
BUSINESS, SIGNAGE WILL EXCEED CODE
ALLOWANCE OF 150 SQ FT.

3. Explain how strict compliance with area, setbacks, frontage, height, bulk, density, or other dimensional standards would unreasonably prevent the owner from using the property for a permitted purpose, thereby rendering the conformity unnecessarily burdensome for other than financial reasons.

DUE TO STRUCTURE SETBACK, THE SIGNAGE
NEEDS TO BE MORE VISIBLE.

4. Explain how a variance would provide and preserve a substantial property right similar to that possessed by other properties within the same zoning district and in the neighboring area, provided that possible increased financial return is not of itself deemed sufficient to warrant a variance.

THE VARIANCE WOULD WELCOME THE NEW
BRANDING AS WELL AS HOLD MARKETS IN THE
B-1 DISTRICT WITH PROPER VISUAL REPRESENTATION.

5. Explain how the plight of the owner is due to the unique circumstances of the property, such as the shape of the parcel, unique topographic environmental conditions, or other physical situation(s) on the land, building, or structure.

THE STRUCTURE THAT WILL RECEIVE SIGNAGE
IS SITUATED IN AN ACTIVE SHOPPING COMPLEX.
IT IS CONSIDERED A FLAGSHIP STORE. IN ADDITION,
IT SITS AT A BUSY BUSINESS CORNER OF 14
MILE RD. AND CAMPBELL RD.

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6. Explain how the requested variance(s) is/are the minimum amount necessary to permit reasonable use of the land, building, or structure.

THE VARIANCE WOULD ALLOW FOR MORE SQUARE FOOTAGE TO MEET BRANDING EXPECTATIONS AND MEET THE LEVEL OF VISUAL REPRESENTATION FOR A BUSY BUSINESS LOCATION.

7. Describe how the authorization of such variance will not be of substantial detriment to adjacent properties and will not materially impair the intent and purposes of the Zoning Ordinance or the public health, safety, and general welfare of the community.

THE PROPOSED VARIANCE WOULD NOT HINDER OR DETOUR FROM ANY ADJACENT BUSINESS OR PROPERTIES. IT WILL AID THE CONSUMER TO THE LOCATION

8. Describe how the need for the variance(s) is not the result of actions of the property owner or previous property owners.

THE NEED OF THE VARIANCE IS BASED ON THE CONSUMER DIRECTION. PROMOTE A FLAGSHIP BUSINESS AT AN ACTIVE LOCATION.

9. Provide conceptual site plan or plot plan, properly scaled, showing: dimensions from street/property lines, sidewalks, building on site and on adjoining properties, easements, and other facilities, structures, and site conditions pertaining to the variance or alteration request. (Refer to Checklist included in this application).