

CITY OF MUNISING  
REQUEST FOR PAYMENT IN LIEU OF OFF-STREET PARKING

Applicant \_\_\_\_\_  
Street/Box \_\_\_\_\_  
City \_\_\_\_\_  
State/Zip \_\_\_\_\_  
Daytime Phone \_\_\_\_\_

|                                   |       |
|-----------------------------------|-------|
| For Zoning Administrator Use Only |       |
| File #                            | _____ |
| Date                              | _____ |
| Receipt #                         | _____ |
| Hearing Date                      | _____ |
| Tax Code #                        | _____ |
| Fee Paid                          | _____ |

Zoning District of Use: D T LC (Circle one)

Description of intended use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Address of intended use: \_\_\_\_\_

Number of minimum spaces required by ordinance: \_\_\_\_\_

Circumstances why cannot provide for required spaces: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I/We request to contribute funds to the City of Munising Alternative Parking fund, as established in Section 417(B) of the Zoning Ordinance in lieu of providing the minimum required off-street parking spaces for my/our intended use. I have received and understand Section 416 Payment in Lieu of Off-Street Parking.

\_\_\_\_\_  
Date

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

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ZONING BOARD OF APPEALS ACTION:

Parking spaces required: \_\_\_\_\_

Parking spaces waived: \_\_\_\_\_

Contribution to Alternative Parking Fund: \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chair, Zoning Board of Appeals