



# ZONING PERMIT APPLICATION

Keweenaw County Zoning Ordinance Sections 18.8.1 requires an approved Zoning Permit for all work. The permit is **required prior to** beginning any work. A zoning permit must be issued prior to application of a building permit. Zoning Permits are free and include one site visit. Additional site visits are \$50.00 each.

Date 9/12/22		Parcel ID (tax) Number 4210222 350 002		<b>ALL INFORMATION IS REQUIRED</b>	
Property Owner(s) Name Richard Hammersman		Applicant(s) Name Richard E Hammersman			
Mailing Address 4033 Cedar Bay Rd		Mailing Address 4033 Cedar Bay Rd			
City Calumet	State MI	Zip code 49930	City Calumet	State MI	Zip code 49930
Day Phone 906 281-3994	Evening Phone 906 482 4449	Day Phone 906 281 3994	Evening Phone 906 482 4449		
Current Zoning of Property RR	Property Address 4033 Cedar	Location of Property: Between Cedar Hill Rd and Cedar Bay Rd		side of Road	
Lot Size and Total Existing Acreage		Between Cedar Hill Rd and Cedar Bay Rd			
Owner Email Address: REH-99930@GMAIL.COM		Applicant Email Address:			
List below or attach legal description of property.					
Describe what this property will be used for and any structural work to be performed.  PROPOSING 25 X 26 ADDITION ON ORDINANCE HEIGHT 14'6" EXISTING HOUSE TRAILER					

**A SURVEY OR SCALE DRAWING SHOWING ALL DIMENSIONS, (adjacent roads, existing buildings, proposed work, proposed structures and setbacks) MUST ACCOMPANY THIS APPLICATION.**

**THIS APPLICATION MUST BE SIGNED BY THE PROPERTY OWNER OR THEIR AUTHORIZED AGENT**

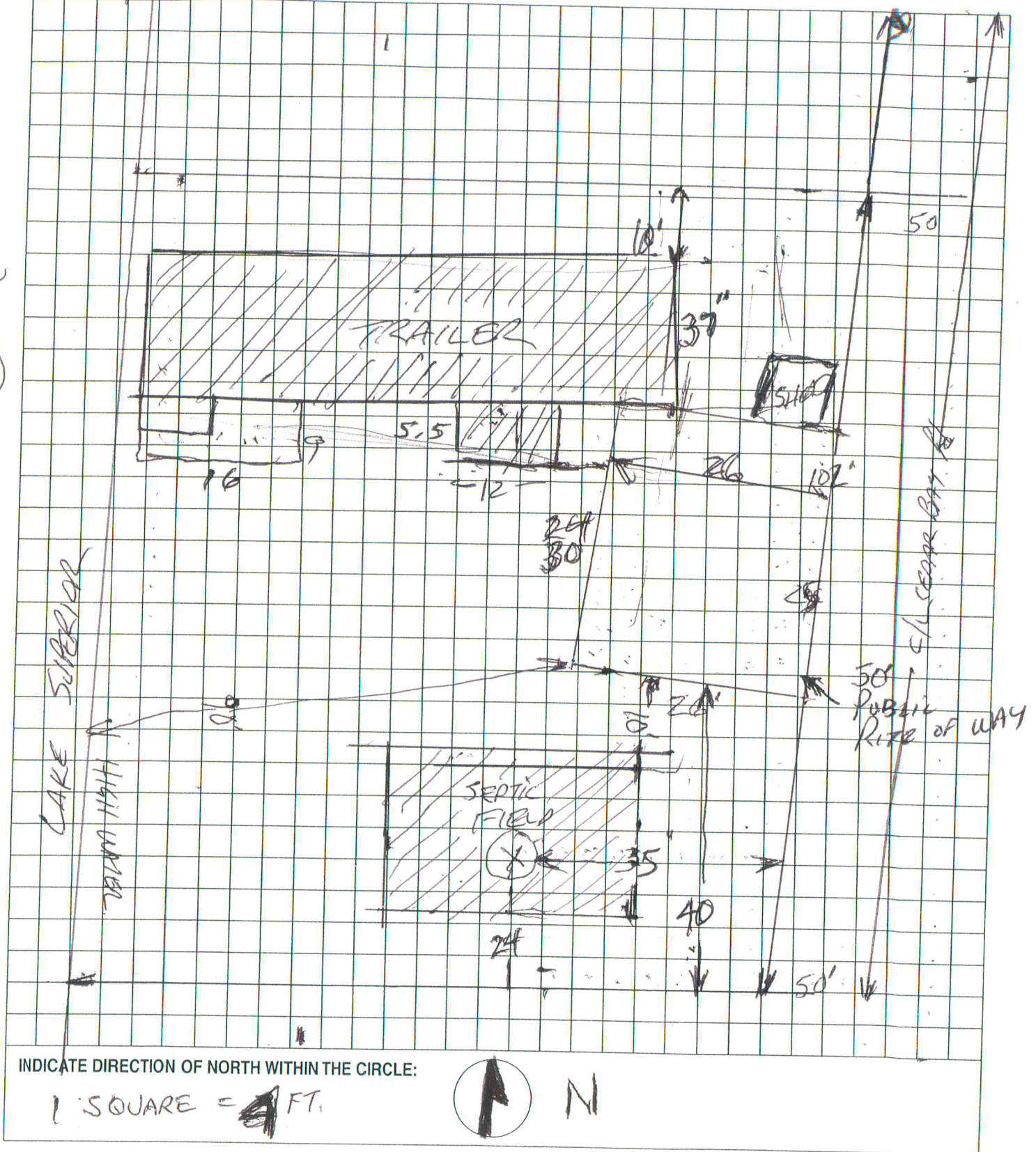
I hereby grant permission for members of the Planning Commission and Zoning Administrator to enter the above described property for the purpose of gathering information related to this application.

Signature and Date Applicant(s) \_\_\_\_\_ Signature (if other than owner): \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE – KEWEENAW COUNTY USE ONLY**

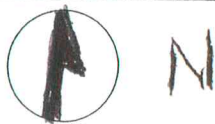
Date Received	Zoning Permit #	Scheduled Site Visit Date	911 Address Number
Septic Permit Number	Well Permit Number	Soil Erosion Permit Number	Culvert Permit Number
Critical Dune Permit Number	DEQ Permit Number	Addtl Site Survey Fees (\$50.00 Each)	Receipt #
<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED reason over _____ Signed _____		Zoning Administrator _____ Date _____	

IX. SITE OR PLOT PLAN - FOR APPLICANT USE



INDICATE DIRECTION OF NORTH WITHIN THE CIRCLE:

1 SQUARE = 1 FT.



BUILDING PROPOSING TO PUT 1" FROM  
ADDITION  
50' PUBLIC RITE OF WAY

1 1/8

21 11/11



**KEWEENAW COUNTY  
PLANNING DEPARTMENT**

5095 4th Street  
Eagle River, MI 49950  
Phone: (906) 337-3471 Fax: (906) 337-2253

**DENIED**

Received: 09/12/2022  
Issued:  
Expires:

**Zoning**

**PZ22-0072**

Category ADDITION

**APPLICANT**

HAMMERSTROM RICHARD & CONN  
4033 CEDAR BAY RD  
CALUMET MI 49913

Phone:

Cell:

**OWNER**

HAMMERSTROM RICHARD & CONN  
4033 CEDAR BAY RD  
CALUMET MI 49913

Phone:

Cell:

Contact:

**LOCATION**

4033 CEDAR BAY RD  
**PID:** 42-102-22-350-002  
**Lot:** 2 **Block:** 22-57-33  
**Plat/Sub:** CHRISTOFERSON PLAT  
**Zoning:** RR

**Work Description:** BUILDING A GARAGE ADDITION 25' X 26', 14'6" IN HEIGHT.

**Stipulations:** DOES NOT MEET 25' SETBACK OFF OF THE PUBLIC RIGHT-OF-WAY.

Permit Item	Fee Basis	Amt Billed	Discount	Item Total
APPLICATION FEE	1.00	250.00	0.00	250.00

All work shall be complete in accordance with applicable codes, and not occupied or put into operation until an use or occupancy permit has been issued through Keweenaw County.

Fee Total: \$250.00  
Amount Paid: \$250.00

**Balance Due:** \$0.00

Receipt Transaction: #00002071

**PERMIT REQUIREMENTS**

MUNICIPAL UTILITY YES NO NR  
AUTHORIZATION

WATER  
SEWER  
DRIVEWAY

**ORDINANCE REQUIRED SETBACKS**

PRIMARY ACCESSORY

75' or 25.00 35'  
10.00 5'  
30.00 10'

FRONT/WATER  
SIDE SETBACK  
REAR SETBACK

SOIL EROSION  
AND  
SEDIMENTATION

PRIMARY STRUCTURE  
Water 28' - otherwise 35'

HEIGHT

LOT COVERAGE

ACCESSORY STRUCTURE  
Alley 15' Other 18'

**APPLICANT PROVIDED**

NOTES

~~XXXXXX~~ **DENIED** BY:

SARA HEIKKILA

DATE:

9/19/2022



## KEWEENAW COUNTY ZONING BOARD OF APPEALS PUBLIC HEARING REQUEST

Fee: \$350.00 for a special meeting and public hearing  
\$250.00 for a regular meeting and public hearing

Date	9/12/27	Parcel ID Number	4210227350002	<b>ALL INFORMATION IS REQUIRED</b>			
Property Owner(s) Name	Richard & Connie Hammerstrom			Applicant(s) Name	Richard Hammerstrom		
Mailing Address	4033 CEDAR Bay Rd			Mailing Address Same	4033 CEDAR Bay Rd		
City	CALUMET	State	MI	Zip Code	49913	City	CALUMET
Day Phone	906 281-3994	Evening Phone	906 482-4449	Day Phone	906 281-3994	Evening Phone	906 482-4449

**THIS APPLICATION MUST BE SIGNED BY THE PROPERTY OWNER(S) OR THE OWNER(S) MAY PROVIDE A LETTER AUTHORIZING THE APPLICANT TO ACT ON THEIR BEHALF.**

Current Zoning of Property	RR	Property Address	4033 CEDAR Bay Rd	Total Acreage single lot	1 Lot
Location of Property:	West Side of Cedar Bay Road		Between 7 <sup>th</sup> and Cedar Hill Rd & End of Cedar Bay Rd	and Road	

<b>Type of Request</b> <input checked="" type="checkbox"/> A variance of a requirement of the Zoning Ordinance <input type="checkbox"/> A review of an administrative decision <input type="checkbox"/> An appeal of a special approval denial <input type="checkbox"/> An interpretation of the Zoning Ordinance text <input type="checkbox"/> An interpretation of the Zoning Map	<b>Article and/or Section of the Zoning Ordinance being appealed</b> Article <u>V</u> Section <u>TABLE 5-1</u> Subsection _____
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Variance requested (The difference between what is required and what is proposed)

NEEDED A VARIANCE FROM THE SAID 25 FT RITE OF WAY TO 1" BECAUSE OF LOVE

In order for a variance to be granted, applicant must demonstrate a hardship or practical difficulty pursuant to the Keweenaw County Zoning Ordinance. Describe the reason(s) for seeking this variance. Please see the attached documents.

**A COMPLETE SITE PLAN CONTAINING ALL OF THE APPLICABLE DATA OUTLINED IN THE KEWEENAW COUNTY ZONING ORDINANCE MUST ACCOMPANY THIS APPLICATION.**

I certify the information on and accompanying this application to be complete, true and correct under penalty of perjury by the laws of the State of Michigan. I also hereby grant permission for members of the Planning Commission, Zoning Board of Appeals and county staff to enter the above described property for the purpose of gathering information related to this application.

Authorized Signature(s) & Date (Letter of authorization required if other than property owner):

**DO NOT WRITE BELOW THIS LINE -KEWEENAW COUNTY USE ONLY**

Date Received	Application Fee	Receipt Number	Case Number
Zoning Administrator Signature & Date			
Publication Date	Date Notices Mailed	Public Hearing Date	Other

THE SAID SET BACK'S OF OUR SEPTIC<sup>EXISTING</sup>  
SYSTEM AND PROPERTY LINE SET BACKS  
IT IS THE ONLY POSSIBLE PLACE TO  
PUT A GARAGE.

Supplemental Information  
Zoning Board of Appeals Case No. \_\_\_\_\_

Please answer each of the following questions which correspond to the findings required for variance approval. The responses will be used by the Zoning Board of Appeals in its review of this case. The case will be heard whether or not the questions are completely answered. It is to **your advantage** to provide as detailed and complete a response to each question since it is your responsibility to provide information on each of the approval standards.

1. Why would strict compliance with the applicable Zoning Ordinance Standard(s) prevent the owner from using the property for a permitted purpose or be unnecessarily burdensome?

NO OTHER ALTERNATIVES TO ADD  
ADDITION / GARAGE WITH SEPTIC AND  
LOT SIZE.

2. How will the requested variance ensure substantial justice (fairness) to **both** the applicant as well as other property owners?

IT WOULD BE FAIR IN THE FACT I  
COULD HAVE A GARAGE / ADDITION WITH OUT  
AFFECTING MY NEIGHBORS AT ALL

3. Why would a lesser variance that would be more fair to other property owners **not** give substantial relief to the applicant?

IN COMPLIANCE WITH A LESSER VARIANCE  
IT WOULDN'T HELP TO GIVE ENOUGH  
ROOM TO BUILD

4. What is unique about the property that is different from other properties in the area or the same zoning district?

IT IS UNIQUE BECAUSE OF SMALL LOT SIZE  
~~ITS NOT UNIQUE BECAUSE OF SMALL LOT SIZE~~  
IS RESTRICTED WITH ALL OF THE SET BACK  
REQUIREMENTS THAT ARE IN PLACE

5. Explain why the requested variance is not due to the actions of the applicant, owner, or their predecessors.

BEING THE OWNER OF SMALLER LOT  
SIZE I CANT CHANGE SAID SET BACKS  
THAT ARE IN PLACE.

Signed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

*Richard E Hammerstrom*  
RICHARD E HAMMERSTROM

This form **must be submitted** along with the application form, plans, and fee. Applications which do not include this form will **not** be accepted.

## Sara Heikkila

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**From:** Gregg Patrick <gregg@keweenawroads.com>  
**Sent:** Monday, September 19, 2022 12:08 PM  
**To:** Sara Heikkila  
**Subject:** RE: 102-22-350-002 - Variance Request for Reduced Setback from ROW

Sara,

We do approve the variance to the 25 foot set back given the small amount of space on that lake lot at 4033 Cedar Bay Road.

Gregg M. Patrick, P.E.  
Engineer/Manager  
Keweenaw County Road Commission  
1916 Fourth Street  
PO Box 379  
Mohawk, MI 49950  
(906) 337-1610

**From:** Sara Heikkila <sara@keweenawcountymi.gov>  
**Sent:** Monday, September 19, 2022 11:53 AM  
**To:** Gregg Patrick <gregg@keweenawroads.com>  
**Subject:** 102-22-350-002 - Variance Request for Reduced Setback from ROW

Hi Gregg,

Please confirm Keweenaw County Road Commission approves a variance from the 25 foot setback requirement from the public right-of-way for a proposed build at 4033 Cedar Bay Road.

Thank you,

Sara Heikkila  
Zoning Administrator  
Keweenaw County  
5095 4<sup>th</sup> Street  
Eagle River, MI 49950  
P 906-337-3471  
F 906-337-2253  
**NEW EMAIL ADDRESS**  
[planning@keweenawcountymi.gov](mailto:planning@keweenawcountymi.gov)



[www.keweenawcountyonline.org](http://www.keweenawcountyonline.org)

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