



CITY OF EAST LANSING REZONING APPLICATION

The undersigned hereby respectfully request(s) that the following described parcel(s) of land lying within the City of East Lansing be rezoned:

from the existing: C, RM 32, P District
to the proposed: B-3 District

Legal Description of the Property to be Rezoned (attach separate sheet if necessary):

Refer to the attached written and graphic Exhibits for the properties requested to be rezoned. _____

Also Known As (Street Address): see above

Parcel ID No(s): see above Parcel Size: see above

Reason(s) for Requested Rezoning - Please attach a separate sheet indicating reason(s).

Site Plan Application Also Submitted: No Yes, date: 2/28/14

I (we) hereby grant permission for members of the East Lansing City Council, its Planning Commission, its staff, and its consultants the right to enter onto the property described in this application in my (our) absence for the purpose of gathering information, including but not limited to the taking and use of photographs.
Please check one: Yes No

Respectfully submitted by: *** applicant information provided on page 2 ***

City Center Two Project LLC
Name of Property Owner Applicant
1427 W. Saginaw Street, Suite 150
Mailing Address
East Lansing MI 48823
City State Zip
517.664.4111 517.664.4151 517.282.8440
Phone Fax Cell
Thomas Elbert 2-28-14
Signature Authorized Agent Date

Matt Hagan LLC
Name of Property Owner Applicant
927 E. Grand River Avenue, Suite 11
Mailing Address (do not complete if same)
East Lansing MI 48823
City 351.0765 State Zip
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Phone Fax Cell
Matt Hagan 2-28-14
Signature Date

Please Note: All legal owners of the above described parcel(s) must sign the Application
(Additional forms may be used if necessary)

Return Completed Application and Filing Fee of \$1,000.00 plus \$100.00 per acre to:

City of East Lansing
Planning & Community Development
410 Abbot Road
East Lansing, MI 48823

For Office Use:

Date Application Received: _____ Ordinance Number: _____

Fee: \$1,000 + (\$100 x _____ acres) = \$ _____

Check No: _____ Date Rec'd: _____ Rec'd by: _____

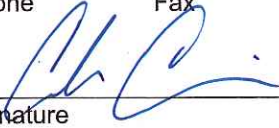
Wetland: Y N Flood Plain: Y N Historic District: Y N DDA Area: Y N

Note: If the application involves property which falls within any of the above designated special areas, review by one or more other City boards or commissions will likely be required and may affect the overall review schedule.

Ownership and legal description verified by the Assessor: Y N Date: _____

The schedule below reflects the standard review process outlined in the Zoning Code and in the Planning Commission's Bylaws. It may be necessary for the Planning Commission and/or the City Council to defer action on the application to one or more subsequent meetings to gather further information or to accommodate additional review and debate. The owner, applicant, or their design assistants will be advised in advance of any change(s) in the meeting schedule on the application.

Wednesday:	Tuesday:
Planning Commission Hearing _____	Introduction by City Council _____
Planning Commission Action _____	City Council Hearing _____
	City Council Action _____

Applicant Information:		
DTN Park District, LLC		
Name of Applicant		
2502 Lake Lansing Road, Suite C		
Mailing Address		
Lansing	MI	48912
City	State	Zip Code
517.371.5300	517.371.2731	517.204.0041
Phone	Fax	Cell
		2/28/14
Signature		Date