Forms, Procedures, & Fee Schedule
Zoning, Sign, & Vacation Proposals
City of Jackson, Michigan

forms included
District Change (Rezoning) ................................................................. 5
Planned Unit Developments
Planned Unit Development District ................................................. 9
Planned Building Group Shopping Center .............................. 11
Conditional Use Permit ............................................................... 15
Site Plan Review .......................................................................... 19
Zoning & Sign Ordinance Appeals & Interpretations
Appeal from a Zoning Decision (Variance) .......................... 23
Interpretation of Zoning Text or Map ................................... 25
Appeal from a Signage Decision ..................................................... 27
Interpretation of Signage Text or Map ........................................ 29

procedure included
Alley & Street Vacation (Closing) Procedure ................................ 33

Revised July 2012
Contact Information

1st Contact for
all Zoning Proposals

Neighborhood & Economic Operations
City Hall, 3rd floor
161 W. Michigan Avenue
Jackson, MI 49201
517.788.4060 (phone)
517.780.4781 (fax)

1st Contact for
all Street & Alley Vacations

Lynn Fessel, City Clerk
City Hall, 1st floor
161 W. Michigan Avenue
Jackson, MI 49201
517.768.6366 (phone)
517.788.4651 (fax)

Reviewer of

District Changes, Planned Unit Developments,
Conditional Use Permits, Site Plan Reviews,
Alley & Street Vacations, Zoning & Sign Ordinance Appeals
and Interpretations

Barry Hicks, AICP
Planning Director
Neighborhood & Economic Operations
City Hall, 3rd floor
161 W. Michigan Avenue
Jackson, MI 49201
bhicks@cityofjackson.org (email)
517.768.6433 (phone)
517.780.4781 (fax)
### Fee Schedule

#### District Changes (Rezonings):
- Rezoning property to an R-1 or R-2 District ................................................................. **$230.00**
  - Plus, each acre or portion thereof ........................................................................ **$25.00**
- Rezoning Property to an R-2, R-3, R-4, R-5 or R-6 District ................................... **$230.00**
  - Plus, each acre or portion thereof ........................................................................ **$40.00**
- Rezoning property to C-1, C-2, C-3, C-4, I-1 or I-2 ........................................... **$305.00**
  - Plus, each acre or portion thereof ........................................................................ **$75.00**
- Text amendment ................................................................................................... **$230.00**

#### Planned Unit Developments:
- Planned Unit Development Developments ............................................................... **$230.00**
  - Plus, each acre or portion thereof ........................................................................ **$40.00**
- Planned Building Group Shopping Centers ............................................................ **$305.00**
  - Plus, each acre or portion thereof ........................................................................ **$75.00**

#### Conditional Use Permits:
- Conditional Use Permit request .............................................................................. **$200.00**
  - Plus, each acre or portion thereof ........................................................................ **$40.00**
- Amendment of a Conditional Use Permit ................................................................. **$160.00**

#### Site Plan Reviews:
- Based Upon the Square Footage of Building(s):
  - 0 - 2,500 sq ft ........................................................................................ **$115.00**
  - 2,501 - 5,000 sq ft ..................................................................................... **$150.00**
  - 5,001 - 10,000 sq ft ................................................................................... **$230.00**
  - 10,001 - 15,000 sq ft ................................................................................ **$310.00**
  - 15,001 - 25,000 sq ft ................................................................................ **$380.00**
  - 25,001 - 35,000 sq ft ................................................................................ **$460.00**
  - 35,001 - 50,000 sq ft ................................................................................ **$530.00**
  - 50,001 - 65,000 sq ft ................................................................................ **$610.00**
  - 65,001 - above sq ft ................................................................................... **$765.00**
- Amendment of a Site Plan ...................................................................................... **$150.00**
Appeals from Zoning Decisions:

Appeals in a R-1 District ....................................................................................... $165.00
Appeals in a R-2, R-3, R-4, R-5 or R-6 District ..................................................... $225.00
Appeals in a C-1, C-2, C-3, C-4, I-1 or I-2 District ................................................ $300.00
Interpretations of the Zoning Text or Map ........................................................... $115.00

Appeals from Signage Decisions:

Appeals in a R-1, R-2, or R-5 District ..................................................................... $85.00
 Appeals in a R-3, R-4, or R-6 District ................................................................... $115.00
Appeals in a C-1, C-2, C-3, C-4, PB, I-1 or I-2 District ......................................... $150.00
Interpretations of the Signage Text or Map ............................................................ $65.00
Special Meeting ...................................................................................................... $65.00

Street and Alley Vacations:

Alley Vacations .......................................................................................................No Fee
Street Vacations .......................................................................................................No Fee
Review Process
District Change (Rezoning)

Application Submitted

- Application reviewed by staff
- Zoning Department Head Meeting held
- Staff recommendation prepared
- Public hearing held

Planning Commission Recommendation

City Council Decision

- Public hearing held
- Second reading before Council
- 1-month petition period

Rezoning Finalized
Application for District Change (Rezoning)

Before the City Planning Commission
City of Jackson, Michigan

1. Application

<table>
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<th>PDC</th>
<th>Date Filed:<strong>/</strong>/__</th>
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To be filled out by N&EO Staff
To be filled out by N&EO Staff

2. Name(s) 

____________________________________________________

Street Address ________________________________________

City , State ZIP Phone Number

Email

Owners Occupants Buyers

Status of the Applicant* (Circle One)

of the property located at: ________________________________ , ___________________________________

property identification #: ________________________________

I (we) respectfully request a determination be made by the City Planning Commission on the following change of zoning as provided in §28-183 of the Zoning Ordinance:

3. Current zoning: R-1 R-2 R-3 R-4 R-5 R-6 C-1 C-2 C-3 C-4 I-1 I-2 PUDD

Circle One

Proposed zoning: R-1 R-2 R-3 R-4 R-5 R-6 C-1 C-2 C-3 C-4 I-1 I-2

Circle One

The proposed use is:

____________________________________________________

____________________________________________________

5. I certify that the information provided above is correct to the best of my belief and knowledge.

____________________________________________________

Name & Title

____________________________________________________

Signature

____________________________________________________

Name & Title

____________________________________________________

Signature

6. City Clerk Use Only:

Date: ___ / ___ / ___ Fee: $ __________ Receipt #: __________

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Review Process

Planned Unit Development

(PUDD, PURD, & PB)

Application Submitted

Preliminary Plan

Application reviewed by staff
Zoning Dept. Head Meeting held
Staff recommendation prepared

Planning Commission Recommendation

Public hearing held

City Council Decision

Final Plan

Application reviewed by staff
Zoning Dept. Head Meeting held
Staff recommendation prepared

Planning Commission Recommendation

Public hearing held

City Council Decision

Public hearing held
Results in a Rezoning

Second reading before Council
1-month petition period

Applicant Can Submit Final Plan if Approved

Rezoning Finalized
**Application for Planned Unit Development District**  
*Before the City Planning Commission*  
*City of Jackson, Michigan*

1. **Application**  
   PPUDD_________________  
   **Date Filed:** __/__/__  
   *To be filled out by N&EO Staff*

2.  
   _______________________________________________________________________
   **Name(s)**

   _______________________________________________________________________
   **Street Address**

   ___________________ , ___________________ (____) - ____________
   **City** , **State** **Zip** **Phone Number**

   ___________________ , ___________________
   **Email**

   _______________________________________________________________________
   **Owners** **Occupants** **Buyers**

   ___________________
   **Status of the Applicant** *(Circle One)*

   _______________________________________________________________________
   **Property of the property located at:** ___________________, ___________________

   _______________________________________________________________________
   **Street Address**

   ___________________ , ___________________
   **Zip Code**

   _______________________________________________________________________
   **property identification #:** ___________________

   ___________________
   **I (we) respectfully request a determination be made by the City Planning Commission on a Planned Unit Development District as provided in §28-48 of the Zoning Ordinance:**

3. **Property zoning:**  
   R-1  R-2  R-3  R-4  R-5  R-6  C-1  C-2  C-3  C-4  I-1  I-2

   *Circle One*

   _______________________________________________________________________
   **The proposed development can be described as:** ___________________

4.  
   **A preliminary site plan and documentation meeting the requirements of §28-48(f) of the Zoning Ordinance, including an appropriate scale, shall be submitted showing the subject property and adjacent properties. A final site plan meeting the requirements of §28-48(g) of the Zoning Ordinance will be required at a later time.**

5.  
   **I certify that the information provided above is correct to the best of my belief and knowledge.**

   _______________________________________________________________________
   **Name & Title**

   _______________________________________________________________________
   **Signature**

   _______________________________________________________________________
   **Name & Title**

   _______________________________________________________________________
   **Signature**

6.  
   **City Clerk Use Only:**
   **Date:** __/__/__  
   **Fee:** $ ________  
   **Receipt #:** ________

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Application for Planned Building Group Shopping Center
Before the City Planning Commission
City of Jackson, Michigan

1. Application

PPUDD________________________

Date Filed: ____________/_________/_________

To be filled out by N&EO Staff

2. ____________________________________________________________________________________

Name(s)

Street Address

Email

Owners  Occupants  Buyers

City  State  Zip  Phone Number

( )

Status of the Applicant* (Circle One)

of the property located at:

property identification #: ________________________________

I (we) respectfully request a determination be made by the City Planning Commission on a Planned Building Group Shopping Center as provided in §28-160 of the Zoning Ordinance:

3. Property zoning:

C-1  C-2  C-3  C-4

Circle One

The proposed development can be described as: ________________________________

4. A preliminary site plan and documentation meeting the requirements of §28-160(a) and -155 of the Zoning Ordinance, including an appropriate scale, shall be submitted showing the subject property and adjacent properties. A final site plan meeting the requirements of §28-160(c) of the Zoning Ordinance will be required at a later time.

5. I certify that the information provided above is correct to the best of my belief and knowledge.

Name & Title ____________________________________________

Signature ______________________________________________

Name & Title ____________________________________________

Signature ______________________________________________

6. City Clerk Use Only:

Date: ________/_______/_______ Fee: $__________ Receipt #: _______

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Review Process
Conditional Use Permit (CUP)

Need for a CUP Determined

Application Submitted

Application reviewed by staff
Zoning Department Head Meeting held
Staff recommendation prepared

Planning Commission Decision

Public hearing held
Conditions may be set

CUP Finalized

Required Variances Received

Approval letter sent to applicant
Application for Conditional Use
Before the City Planning Commission
City of Jackson, Michigan

1. Application: PCUP ____________ Date Filed: __/__/________
   To be filled out by N&EO Staff To be filled out by N&EO Staff

2. Name(s) ___________________________________________ Email ________________________________________
   Street Address ___________________________________ City State Zip ____________________________
   _______________________________________________ Phone Number __________________________

   of the property located at: ___________________________, ____________________________
   Street Address ____________________________ Zip Code ____________________________

   property identification #: ____________________________

I (we) respectfully request a determination be made by the City Planning Commission on a Conditional Use as provided in §28-145 of the Zoning Ordinance:

3. Property zoning:  R-1  R-2  R-3  R-4  R-5  R-6  C-1  C-2  C-3  C-4  I-1  I-2
   Circle One
   The following Conditional Use is being requested:  [§28-71 ( _______ )] __________

4. A site plan meeting the requirements of §28-135 of the Zoning Ordinance, including an appropriate scale, shall be submitted showing the subject property and adjacent properties. The site plan shall show the location of the property of the proposed use as it meets the requirements of the Zoning Ordinance.

5. I certify that the information provided above is correct to the best of my belief and knowledge.

   Name & Title __________________________________________ Name & Title ____________________________
   ____________________________ ____________________________
   Signature ____________________________ Signature ____________________________

6. City Clerk Use Only:
   Date: __/__/________ Fee: $ ____________ Receipt #: _______________________

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Review Process

Site Plan Review (SPR)

Building Permit Requested

Need for SPR Determined

No Review Required

Planning Commission Review

Application Submitted

Staff Review

Required Variances Received

Application reviewed by staff
Zoning Department Head Meeting held
Staff recommendation prepared

Public hearing held
Conditions may be set

Approval letter sent to applicant

SPR Finalized
Application for Site Plan Review
Before the City Planning Commission
City of Jackson, Michigan

1. Application 
PSP                        Date Filed:   / /   
   To be filled out by N&EO Staff
   To be filled out by N&EO Staff

2. _____________________________________________________________
   Name(s)
   _____________________________________________________________
   Street Address
   __________ , __________ ( __________ ) -
   City State Zip Phone Number
   ____________________________ ____________________________
   Email Owners Occupants Buyers
   ____________________________ ____________________________
   ____________________________ ____________________________
   ____________________________ ____________________________

3. Property identification #: ___________________________________  
   I (we) respectfully request a determination be made by the City Planning 
   Commission on a Site Plan as provided in §28-135 of the Zoning Ordinance:

4. Property zoning:  
   R-1     R-2     R-3     R-4     R-5     R-6     C-1     C-2     C-3     C-4     I-1     I-2
   Circle One
   A site plan for the following use is being requested: ________________

5. A site plan meeting the requirements of §28-135 of the Zoning Ordinance, including 
an appropriate scale, shall be submitted showing the subject property and adjacent properties. The Site Plan shall show the location of the property of the proposed use as it meets the requirements of the Zoning Ordinance.

6. I certify that the information provided above is correct to the best of my belief and knowledge.

   ____________________________ ____________________________
   Name & Title Name & Title
   ____________________________ ____________________________
   Signature Signature

6. City Clerk Use Only:
   Date:   /   /   Fee: $   Receipt #:   

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Review Process

Variance or Interpretation
Zoning & Sign Ordinances

1. Building Permit Requested
2. Need for a Variance or Interpretation Determined
3. Application Submitted
   - Application reviewed by staff
   - Staff recommendation prepared
   - Public hearing held
4. Zoning Board of Appeals Decision
5. Variance or Appeal Finalized
   - Approval letter sent to applicant
Appeal from a Zoning Decision (Dimensional Variance)
Before the Zoning Board of Appeals
City of Jackson, Michigan

1. Application V________________ Date Filed: __________/________/________
   To be filled out by N&EO Staff
To be filled out by N&EO Staff

2. ____________________________________________
   Name(s)

   ____________________________
   Street Address

   ____________________________
   City, State, Zip (______) Phone Number

   Owners, Occupants, Buyers

   Email

   ____________________________
   Property identification #:

   ____________________________
   Street Address

   ____________________________
   Zip Code

   I (we) respectfully request a determination be made by the Zoning Board of Appeals
   concerning the denial of a Zoning Permit as provided in §28-239 of the Zoning
   Ordinance:

3. Property zoning: R-1 R-2 R-3 R-4 R-5 R-6 C-1 C-2 C-3 C-4 I-1 I-2
   Circle One

4. The following variance is requested: [ §28- _______ ]

5. ____________________________

6. The following substantial property rights will be denied if this petition is not granted:

7. Each of THE FOLLOWING ITEMS MUST BE ADDRESSED. Your application will
   be considered incomplete and will not go before the Zoning Board of Appeals until
   this section is complete. Please attach to this application, or submit electronically,
   your response to each item.

   §28-238(c). – Variances. In authorizing a variance with conditions, the board shall
   require such evidence and bond as it may deem necessary to ensure that the
   conditions are being and will be complied with. No variance in the provisions or
   requirements of this chapter shall be authorized by the board unless the board finds,
   by a preponderance of the evidence that all of the following facts and conditions
   exist:
1) There are exceptional or extraordinary conditions applying to the property that do not apply to other properties or classes of uses in the same zoning district.

2) The exceptional or extraordinary conditions do not result from the actions of any person with a current interest in the property.

3) Strict compliance with this chapter would unreasonably prevent the applicant from using the property for a permitted purpose or would create practical difficulties in conforming to the requirements of this chapter.

4) The authorizing of such variance will not be of substantial detriment to adjacent property, alter the essential character of the area, and will not impair the purposes of this chapter or the public interest.

5) The variance is the minimum variance possible for reasonable use of the property.

6) The variance will not impair an adequate supply of light and air to adjacent property, or substantially increase the congestion in public streets or increase the danger of fire or endanger the public safety or substantially diminish property values within the area.

7) Such variance shall in no manner or guise be construed to allow a change of use but shall allow only a variation or modification from the provisions of this chapter.

8. I certify that the information provided above is correct to the best of my belief and knowledge.

   ____________________________________________________________  ____________________________________________________________
   Name & Title                                                   Name & Title

   ____________________________________________________________  ____________________________________________________________
   Signature                                                     Signature

9. Signature of the Title of Review Official, City of Jackson Inspection Department

   ____________________________________________________________
   Name & Title

   ___________________________ ___________________________
   Signature                   Telephone Number

10. **City Use Only:**

    Date: ___/___/___  Fee: $  Receipt #:  

   * If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
### Appeal from a Zoning Decision (Use Variance)

**Before the Zoning Board of Appeals**  
**City of Jackson, Michigan**

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<th>Application</th>
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To be filled out by N&EO Staff  
To be filled out by N&EO Staff

---

#### 2. Name(s)

- **Street Address:**
- **Email:**
- **Owners**
- **Occupants**
- **Buyers**

**City**  
**State**  
**Zip**  
**Phone Number**

**Status of the Applicant**

- Circle One

---

#### 3. Property zoning:

- **R-1**
- **R-2**
- **R-3**
- **R-4**
- **R-5**
- **R-6**
- **C-1**
- **C-2**
- **C-3**
- **C-4**
- **I-1**
- **I-2**

---

#### 4. The following variance is requested:  

[ §28-______ ]

---

#### 6. The following substantial property rights will be denied if this petition is not granted:

---

#### 7. Each of **THE FOLLOWING ITEMS MUST BE ADDRESSED**. Your application will be considered incomplete and will not go before the Zoning Board of Appeals until this section is complete. Please attach to this application, or submit electronically, your response to each item.

**§28-238(d). – Variances.** In authorizing a variance with conditions, the board shall require such evidence and bond as it may deem necessary to ensure that the conditions are being and will be complied with. No variance in the provisions or requirements of this chapter shall be authorized by the board unless the board finds, by a preponderance of the evidence that all of the following facts and conditions exist:

City of Jackson, Michigan  
Page 18
1) The property cannot be reasonably used for any purpose permitted in the zoning district. There must be financial proof of the applicant’s inability to realize any reasonable return; speculations or a quantity assessment is inadequate.

2) The need for the variance is due to unique circumstances peculiar to the property and not generally applicable to the area or to other properties in the same zoning district. The applicant must demonstrate that there are unique features that make it impossible to earn a reasonable return without some adjustments. In those circumstances where others share the difficulty, the zoning board of appeals may find that relief should be accomplished by an amendment to the zoning ordinance, not a variance.

3) The problem and resulting need for the variance has not been self-created by the applicant.

4) The variance will not alter the essential character of the area. In determining whether this criteria has been met, the established type and pattern of land uses in the area and the natural characteristics of the site and surrounding area shall be considered.

8. I certify that the information provided above is correct to the best of my belief and knowledge.

________________________________________  __________________________________________
Name & Title                                                                                     Name & Title

________________________________________
Signature                                                                                         Signature

9. Signature of the Title of Review Official, City of Jackson Inspection Department

________________________________________
Name & Title                                                                                     Telephone Number

________________________________________
Signature

10. City Use Only:  
Date: / / Fee: $ Receipt #: 

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Interpretation of the Zoning Text or Map

Before the Zoning Board of Appeals
City of Jackson, Michigan

1. Application

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To be filled out by N&EO Staff

2. Name(s)

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<tr>
<th>Street Address</th>
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<th>Zip</th>
<th>Phone Number</th>
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<tr>
<th>Owners</th>
<th>Occupants</th>
<th>Buyers</th>
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</table>

Status of the Applicant* (Circle One)

3. Property zoning:

- R-1
- R-2
- R-3
- R-4
- R-5
- R-6
- C-1
- C-2
- C-3
- C-4
- I-1
- I-2

Circle One

4. The following interpretation is requested: [§28-______]

5. The following exceptional conditions apply to this property and distinguish it from other properties or classes of uses in the surrounding areas:

6. The following substantial property rights will be denied if this petition is not granted:

7. I (we) believe that authorization of this request will not be of substantial detriment to adjacent property and will not impair the purposes of the Zoning Ordinance or the public interest; and understand that granting of this request shall in no manner or guise be construed to mean a change of use, but shall mean only a variation or modification from provisions of the Zoning Ordinance.

8. The PLOT MAP of the premises which has been drawn on this page (or is attached) contains all of the necessary dimensions to describe this application.

9. I certify that the information provided above is correct to the best of my belief and knowledge.
<table>
<thead>
<tr>
<th>Name &amp; Title</th>
<th>Name &amp; Title</th>
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<td>Signature</td>
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10. Signature of the Title of Review Official, City of Jackson Inspection Department

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<tr>
<th>Name &amp; Title</th>
<th>Telephone Number</th>
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11. **City Clerk Use Only:**

| Date: ____ / ____ / ____ | Fee: $ ____ | Receipt #: ____ |

* If the applicant is not the owner of the property, a letter of consent from the property owner must accompany this application.
Procedure for Street and Alley Vacations
(Closings)
Before the City Planning Commission
City of Jackson, Michigan

Please be informed that in order for the City Council to vacate a street or alley a petition to do so must be circulated. The following information must be provided on the petition. It is suggested that the petition circulator follow the steps that are set forth below:

1. Obtain this procedure form from the City Clerk’s Office

2. Visit the City Assessor's office on the 9th floor of City Hall. The Assessor's office will:
   a. Determine if the street/alley is public or private. If the street/alley is private, no City Council action is required.
   b. Prepare and place the legal description on a petition.
   c. Provide the petition circulator with a listing of all title owners of record for each lot or parcel abutting the street or alley to be vacated, including the names of any land contract purchasers of record, and a copy of a plat map showing the affected properties. (Completion of this process may take a few days.)

3. Review the records of the Jackson County Register of Deeds to confirm that the names of persons with interest in the affected parcels, as supplied by the City Assessor's office, are complete and accurate. In lieu of searching the records, the petition circulator may wish to request a search by a title company. There will be a charge for this service. (FAILURE TO LIST ALL PERSONS WITH INTEREST IN THE AFFECTED PROPERTIES MAY INVALIDATE THE PETITION.)

4. Obtain the signatures of each of the persons listed in the above-described records on the petition provided.
   a. Signatures must be in the name of each individual with an interest; i.e., Jane Doe and John Doe, not Mr. and Mrs. John Doe.
   b. Corporations must be signed for by the Chief Executive Officer or authorized person. An authorization or other corporate document naming the individual with authority to sign on behalf of the corporation or entity must be provided to the City with the signed petition.

5. File the completed petition with the City Clerk, and the following steps will be taken by the City of Jackson:
   a. The City Clerk will place the petition on the City Council agenda for receipt and referral to staff.
Forms, Procedures, & Fee Schedule — Zoning, Sign, & Vacation Proposals

b. The petition will be reviewed by the City Attorney's office to verify its legality, then forwarded to the City Planning Commission.

c. The City Planning Commission staff will conduct their investigation and make a recommendation to the City Planning Commission who will consider the petition.

d. The City Clerk's office will receive the recommendation from the City Planning Commission, prepare a resolution, and place the item on the City Council agenda for consideration.

If there are any questions regarding this procedure, please contact the City Attorney's office at 517.788.4050.

NOTE: Any Vacation by the City of Jackson will be subject to a reservation of utility rights-of-way in the street or alley. Therefore, any building or structure erected may not be permitted if it infringes upon the utility rights-of-way. Further, if you plan to erect a building or structure on a vacated street or alley, make certain that it complies with the City’s Zoning Ordinance.