



**City of Port Huron**  
**Rental Division**  
 100 McMorran Blvd.  
 Port Huron, Michigan 48060  
 Phone: 810-984-2465

**RENTAL HOUSING BOARD OF APPEALS**  
**APPLICATION**  
 Appeal/Hardship (\$100.00)

Address/Location of Subject Property: \_\_\_\_\_  
 Parcel # of Subject Property: 74-06-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ Current Zoning Designation: \_\_\_\_\_

**Applicant Information** (Must have a legal interest in the property):

Property Owner	Purchaser - Option or Purchase Agreement	Purchaser - Land Contract
Tenant/Lessee	Developer/Contractor	Engineer/Architect

Name: \_\_\_\_\_ Business/Organization Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Phone (W): \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Phone (C): \_\_\_\_\_ Phone (H): \_\_\_\_\_

***I hereby attest that all information on this application is, to the best of my knowledge, true and accurate:***

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**IF THE APPLICANT IS NOT THE OWNER OF THE PROPERTY, complete the following:**

Name of Property Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_  
 Phone (W): \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Phone (C): \_\_\_\_\_ Phone (H): \_\_\_\_\_

*The undersigned hereby affirms and acknowledges that he/she/they are the owner(s) of the property described in this application, are aware of the contents of the application, and hereby authorize the applicant to submit the application and represent the undersigned in the matter being reviewed by the City of Port Huron. Further, the undersigned hereby grants permission for members of the City of Port Huron Planning Commission/Zoning Board of Appeals/Staff to enter the property described in this application for the purpose of gathering information related to this application.*

**Signature of Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OFFICE USE ONLY**

Received by (initials): \_\_\_\_\_ Date Stamp Received: \_\_\_\_\_  
 Receipt #: \_\_\_\_\_  
 Meeting Date (if applicable): \_\_\_\_\_

Notice of appeal/hardship is hereby given by *(name of applicant)*: \_\_\_\_\_  
to the Administrator of Chapter 10, Buildings and Building Regulations, Article V. Rental Certification, of the Code of Ordinances for the City of Port Huron, regarding a  
decision pertaining to the following property (address): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Legal description of property (attach separate sheet if necessary): \_\_\_\_\_  
\_\_\_\_\_

An appeal/hardship is requested for exemption from the following sections of Chapter 10, Building and Building Regulations, Article V. Rental Certification:

SECTION	TITLE
_____	_____
_____	_____

Reason for appeal/hardship request (for "hardship" see definition below):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Per Sec. 10-178. Rental certification hardship exception, Port Huron Code of Ordinances:**

A "hardship" for purposes of this article shall be defined as the inability of the owner to purchase or pay for one or more of the following without the ability to obtain rents on the subject property:

- a. Medical care or a medical device for the owner or the owner's dependents;
- b. Debts of the owner resulting from a mortgage, land contract or other loan used to purchase the subject property where there is no other available source to pay such debts;

or

- c. Debts of the owner due to child support, alimony, a tax lien, funeral expenses, or a judgment.

A "hardship" shall also include the following circumstances: Where a homeowner owns property that is occupied by the owner and a change in the owner's personal circumstances require a rental to preserve the financial stability of the owner. For example, this section would apply to a person who is required to temporarily relocate their residence for a period of time and needs to rent their home in their absence.