



COMMUNITY DEVELOPMENT DEPARTMENT

45175 Ten Mile Road
Novi, MI 48375
(248) 347-0415 Phone
(248) 735-5600 Facsimile
www.cityofnovi.org

ZONING BOARD OF APPEALS STAFF REPORT

FOR: City of Novi Zoning Board of Appeals

MEETING DATE: June 9, 2026

REGARDING: 26850 Grand River Avenue # 50-22-17-400-038 (PZ26-0017)

BY: Alan Hall, Deputy Director Community Development

I. GENERAL INFORMATION:

Applicant

Henry Ford Health

Variance Type

Sign Variance

Property Characteristics

Zoning District: This property is zoned Office Service Commercial (OSC)

Location: south of Grand River Avenue, west of Beck Road

Parcel #: 50-22-17-400-038

Request

The applicant is requesting variances from City of Novi Sign Ordinance Section 28-5(a) Chart to allow an increase in the number of signs and height of ground signs beyond what is permitted.

II. STAFF COMMENTS:

The applicant is seeking sign variances to allow additional ground signs.

III. RECOMMENDATION:

The Zoning Board of Appeals may take one of the following actions:

I move that we **grant** the variance in Case No. **PZ26-0017** sought by _____,
for _____ because Petitioner has shown practical difficulty including
_____ requiring _____ on the basis of any of the following:

- a. That the request is based upon circumstances or features that are exceptional and unique to the property and do not result from conditions that exist generally in the city or that are self-created including _____
_____.
- b. That the failure to grant relief will unreasonably prevent or limit the use of the property and will result in substantially more than mere inconvenience or inability to attain a higher economic or financial return because _____
_____.
- c. That the grant of relief would be offset by other improvements or actions, such as increased setbacks or increased landscaping, such that the net effect will result in an improvement of the property or the project _____
_____.
- d. That construction of a conforming sign would require the removal or significant alteration of natural features on the property because _____
_____.
- e. The grant of relief will not result in a use or structure that is incompatible with or unreasonably interferes with adjacent or surrounding properties, will result in substantial justice being done to both the applicant and adjacent or surrounding properties, and is not inconsistent with the spirit and intent of this chapter because _____
_____.

The variance granted is subject to:

- 1. _____.
- 2. _____.
- 3. _____.
- 4. _____.

Zoning Board of Appeals

Henry Ford Health

Case # PZ26-0017

June 9, 2026

Page 3 of 3

I move that we **deny** the variance in Case No. **PZ26-0017** sought by _____, for _____ because Petitioner has not shown practical difficulty because: _____

a. That the request is based upon circumstances or features that are not exceptional and/or unique to the property and/or that result from conditions that exist generally in the city or that are self-created including _____

b. That the failure to grant relief will not unreasonably prevent or limit the use of the property and/or will not result in substantially more than mere inconvenience or inability to attain a higher economic or financial return because _____

c. That the grant of relief would not be offset by other improvements or actions, such as increased setbacks or increased landscaping, such that the net effect will not result in an improvement of the property or the project because _____

d. That construction of a conforming sign would not require the removal or significant alteration of natural features on the property because _____

e. The grant of relief will result in a use or structure that is incompatible with or unreasonably interferes with adjacent or surrounding properties, will not result in substantial justice being done to both the applicant and adjacent or surrounding properties, and is inconsistent with the spirit and intent of this chapter because _____

Should you have any further questions with regards to the matter please feel free to contact me at (248) 347-0423.

Alan Hall – Deputy Director Community Development - City of Novi



45175 Ten Mile Road
 Novi, MI 48375
 (248) 347-0415 Phone
 (248) 735-5600 Facsimile
 www.cityofnovi.org

ZONING BOARD OF APPEALS APPLICATION

RECEIVED

MAR 30 2026

CITY OF NOVI
 COMMUNITY DEVELOPMENT

APPLICATION MUST BE FILLED OUT COMPLETELY

I. PROPERTY INFORMATION (Address of subject ZBA Case)				Application Fee: \$330 ⁰⁰ Meeting Date: 6/9/26 ZBA Case #: PZ 26-0017	
PROJECT NAME / SUBDIVISION HENRY FORD HEALTH					
ADDRESS 27850 PROVIDENCE PARKWAY				LOT/SIUTE/SPACE #	
SIDWELL # 50-22-17		-400		-038	
CROSS ROADS OF PROPERTY north of 10 mile road, west of Haggerty Road					
IS THE PROPERTY WITHIN A HOMEOWNER'S ASSOCIATION JURISDICTION?			REQUEST IS FOR:		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> VACANT PROPERTY <input checked="" type="checkbox"/> SIGNAGE		
DOES YOUR APPEAL RESULT FROM A NOTICE OF VIOLATION OR CITATION ISSUED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
II. APPLICANT INFORMATION					
A. APPLICANT		EMAIL ADDRESS		CELL PHONE NO.	
NAME Damiane' Handa				TELEPHONE NO.	
ORGANIZATION/COMPANY Expedite The Diehl LLC				FAX NO.	
ADDRESS 6487 Hilliard Dr		CITY Canal Winchester		STATE OH	ZIP CODE 43110
B. PROPERTY OWNER <input type="checkbox"/> CHECK HERE IF APPLICANT IS ALSO THE PROPERTY OWNER					
Identify the person or organization that owns the subject property:		EMAIL ADDRESS		CELL PHONE NO.	
NAME HTA-SJ PROVIDENCE, LLC				TELEPHONE NO.	
ORGANIZATION/COMPANY ATTN: REAL PROPERTY TAX DEPARTMENT				FAX NO.	
ADDRESS 3310 WEST END AVENUE SUITE 700		CITY NASHVILLE		STATE TN	ZIP CODE 37203
III. ZONING INFORMATION					
A. ZONING DISTRICT					
<input type="checkbox"/> R-A <input type="checkbox"/> R-1 <input type="checkbox"/> R-2 <input type="checkbox"/> R-3 <input type="checkbox"/> R-4 <input type="checkbox"/> RM-1 <input type="checkbox"/> RM-2 <input type="checkbox"/> MH <input type="checkbox"/> I-1 <input type="checkbox"/> I-2 <input type="checkbox"/> RC <input type="checkbox"/> TC <input type="checkbox"/> TC-1 <input checked="" type="checkbox"/> OTHER <u>OS-1</u>					
B. VARIANCE REQUESTED					
INDICATE ORDINANCE SECTION (S) AND VARIANCE REQUESTED:					
1. Section <u>28-5 Chart</u>		Variance requested <u>Exceed number of ground signs</u>			
2. Section _____		Variance requested _____			
3. Section _____		Variance requested _____			
4. Section _____		Variance requested _____			
IV. FEES AND DRAWINGS					
A. FEES					
<input type="checkbox"/> Single Family Residential (Existing) \$220 <input type="checkbox"/> (With Violation) \$275 <input type="checkbox"/> Single Family Residential (New) \$275 <input type="checkbox"/> Multiple/Commercial/Industrial \$330 <input type="checkbox"/> (With Violation) \$440 <input checked="" type="checkbox"/> Signs \$330 <input type="checkbox"/> (With Violation) \$440 <input type="checkbox"/> House Moves \$330 <input type="checkbox"/> Special Meetings (At discretion of Board) \$660					
B. DRAWINGS 1-COPY & 1 DIGITAL COPY SUBMITTED AS A PDF					
<ul style="list-style-type: none"> • Dimensioned Drawings and Plans • Site/Plot Plan • Existing or proposed buildings or addition on the property • Number & location of all on-site parking, if applicable 			<ul style="list-style-type: none"> • Existing & proposed distance to adjacent property lines • Location of existing & proposed signs, if applicable • Floor plans & elevations • Any other information relevant to the Variance application 		



ZONING BOARD OF APPEALS APPLICATION

V. VARIANCE

A. VARIANCE (S) REQUESTED

DIMENSIONAL USE SIGN

There is a five-(5) hold period before work/action can be taken on variance approvals.

B. SIGN CASES (ONLY)

Your signature on this application indicates that you agree to install a **Mock-Up Sign** ten-(10) days before the schedule ZBA meeting. Failure to install a mock-up sign may result in your case not being heard by the Board, postponed to the next schedule ZBA meeting, or cancelled. A mock-up sign is **NOT** to be actual sign. Upon approval, the mock-up sign must be removed within five-(5) days of the meeting. If the case is denied, the applicant is responsible for all costs involved in the removal of the mock-up or actual sign (if erected under violation) within five-(5) days of the meeting.

C. ORDINANCE

City of Novi Ordinance, Section 3107 – Miscellaneous

No order of the Board permitting the erection of a building shall be valid for a period longer than one-(1) year, unless a building permit for such erection or alteration is obtained within such period and such erection or alteration is started and proceeds to completion in accordance with the terms of such permit.

No order of the Board permitting a use of a building or premises shall be valid for a period longer than one-hundred and eighty-(180) days unless such use is establish within such a period; provided, however, where such use permitted is dependent upon the erection or alteration of a building such order shall continue in force and effect if a building permit for such erection or alteration is obtained within one-(1) year and such erection or alteration is started and proceeds to completion in accordance with the terms of such permit.

D. APPEAL THE DETERMINATION OF THE BUILDING OFFICIAL

PLEASE TAKE NOTICE:

The undersigned hereby appeals the determination of the Building Official / Inspector or Ordinance made

CONSTRUCT NEW HOME/BUILDING ADDITION TO EXISTING HOME/BUILDING SIGNAGE
 ACCESSORY BUILDING USE OTHER _____

VI. APPLICANT & PROPERTY SIGNATURES

A. APPLICANT

Damiane Handa
Applicant Signature

3/26/2025
Date

B. PROPERTY OWNER

If the applicant is not the owner, the property owner must read and sign below:

The undersigned affirms and acknowledges that he, she or they are the owner(s) of the property described in this application, and is/are aware of the contents of this application and related enclosures.

SEE ATTACHED LETTER

Property Owner Signature

Date

VII. FOR OFFICIAL USE ONLY

DECISION ON APPEAL:

GRANTED

DENIED

The Building Inspector is hereby directed to issue a permit to the Applicant upon the following and conditions:

Chairperson, Zoning Board of Appeals

Date

AFFIDAVIT OF PERMIT AUTHORIZATION

This affidavit certifies that the party listed, who is not a lessee, licensed architect, engineer, or contractor, has been granted authorization to obtain a permit(s) on behalf of a property owner. It must be filled out completely by the property owner if another party is submitting an application(s) on the owner's behalf.

I, 26850 Providence, LLC owner of the improvements at the property listed below certify that I have granted, STRATUS and their permit expeditor Expedite The Diehl, LLC (Tracey Diehl, Damiane' Handa, Pete Hatcher) my duly authorized agent, permission to the variance, sign permits, and all related documents necessary for the review, approval and construction (or installation) of signs at the following address:

HENRY FORD HEALTH
26850 Providence Parkway
NOVI, MI 48374
Address of permit location

I understand that I am authorizing them to apply for necessary permit and related permit documents. This is limited to what is necessary for sign permit projects to be completed and if subsequently revoked in writing by the undersigned.

[Signature]
Signature of Property Owner

3/20/26
Date

Notary

State of California

City/ County of IRVINE / Orange

I, Danielle G. De Souza Notary Public in and for the aforesaid State hereby certify that AMEK MALAS appeared before me in the State and City/County aforesaid and executed this affidavit on this March 20 day of "2026.

[Signature]
Notary Public

My Commission Expires the 5 day of February, 2030.
Date Month year

Seal



Requests:

1.) A variance to permit more than 1 ground sign - Section 28-5 Chart

Variance Standards:

Standard #1. Extraordinary Circumstances or Conditions.

Explain how the circumstances or physical conditions applying to the property that do not apply generally to other properties in the same Zone District or in the general vicinity. Circumstances or physical conditions may include:

- a. Shape of Lot.** *A sign could not be placed in the location required by the Zoning Ordinance due to the shape, topography or other physical conditions of the lot or due to the location of an existing structure.*

This building is part of a large hospital campus and has a very large parking lot frontage. These circumstances are not due to general neighborhood conditions.

- b. Environmental Conditions.** *A sign could not be placed in the location required by the Zoning Ordinance without removing or severely altering natural features, such as trees, topography, drainage courses or encroaching upon stormwater facilities.*

Granting the variance will not be a detriment to the environmental conditions as these signs are in existence and this is an existing medical building. The variance will not affect the natural features such as trees, topography, drainage courses or encroaching upon stormwater facilities. Denial of the variance that results in removal of signage will however cause public harm, as this is an emergency facility and adequate signage is essential.

- c. Abutting Property.** *A sign could not be reasonably seen by passing motorists due to the configuration of existing buildings, trees, signs or other obstructions on an abutting property.*

The variance is necessary for the preservation of the hospital campus and upgrades to the signage will produce an overall positive aesthetic result that will be enjoyed by nearby properties.

- d. Scale of Building or Lot Frontage.** *A sign that exceeds permitted dimensions for area and/or height could be considered appropriate in scale due to the length of the building frontage (wall sign only) or length of the lot frontage (ground sign only).*

The proposed signage is consistent with what is needed for the entire hospital campus to function including the buildings that directly share parking lots, entrances and are extensions of the main hospital campus. The signage provides wayfinding, navigation, and facilitates movement of pedestrian and vehicular traffic on campus in all weather conditions. The fonts must be legible in all types of weather conditions, day or night, and when visitors and patients are under duress. It's imperative to understand that the hospital campus is large and the signage is appropriate in scale for a hospital campus.

The ordinance in place does not make allowances for this type of facility and is more appropriate for a small business. This is not self-created, one of the signs here are in existence, and this variance is for the continuation of that existing non-conforming sign that needs to be updated. The other proposed sign is needed to clearly identify the services of this building.

Standard #2. Limit Use of Property.

Explain how the failure to grant relief will unreasonably prevent or limit the use of the property and will result in substantially more than mere inconvenience or inability to attain a higher economic or financial return.

Denial of the variance that results in removal of signage or denial of the additional sign will however cause public harm, as these signs will clearly navigate patrons to the proper building and their services. Furthermore, the signs proposed help patrons to distinguish that this area of the campus is not for the emergency room and allowing this adequate signage is essential for wayfinding purposes.

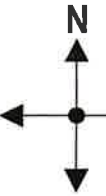
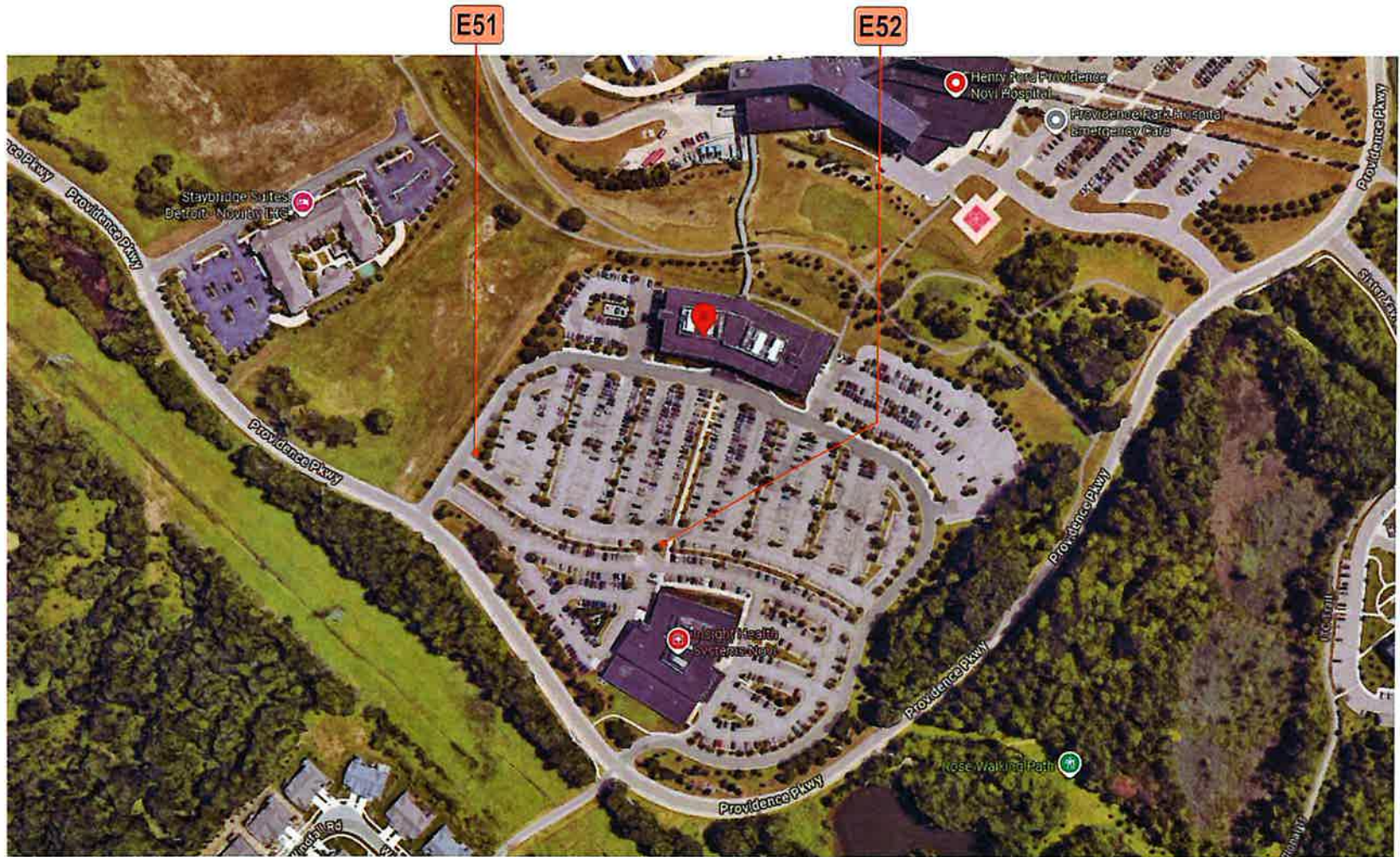
Standard #3. Adverse Impact on Surrounding Area.

Explain how the Sign Variance will not result in a use or structure that is incompatible with or unreasonably interferes with adjacent or surrounding properties, will result in substantial justice being done to both the applicant and adjacent or surrounding properties, and is not inconsistent with the spirit and intent of this chapter.

The current ordinance allows for one ground sign. This is not an appropriate allowance for this building that is part of the large hospital campus where directory signs, and clearly visible signs, are necessary for emergency traffic. Strict compliance with the requirement will prevent the hospital campus from functioning as a medical facility. Each sign proposed is necessary for traffic control, informational purposes, navigation on the campus, and identification of a medical facility. Persons visiting this campus will often be under distress. Clear wayfinding ground signage is necessary. Citizens of the City of Novi as well as transient motorists will use the signage to navigate their way around the hospital in various types of situations. Branding from a distance is equally important. The size of the signage is necessary so that the signs can be seen in all traffic conditions, weather conditions as well as when a vehicle is stopped in front of the signs throughout the parking lots. Directional signage in a hospital setting contains multiple forms of pertinent information. These directional signs provide wayfinding information for those that are unfamiliar with the campus, and they are informational in nature. The proposed signs will be the same design as the rest of the signs proposed for the hospital campus and will be aesthetically pleasing throughout the entire campus.

SITE PLAN

Scale: NTS



Stratus
 onestratus.com
 6359 Tyler Boulevard
 Mentor, Ohio 44060
 888.503.1569

CLIENT:
HENRY FORD HEALTH

ORDER NUMBER:
 1236867

PROJECT NUMBER:
 89324

ADDRESS:
 26850 PROVIDENCE PKWY
 NOVI, MI
 48374-1213

SITE NUMBER:
 2103

PROJECT MANAGER:
 MERCEDES BURTON

PAGE NO.:
2

ELECTRONIC FILE NAME:
 K:\ACCOUNTS\H\Henry Ford Health System\Locations\2025\MI\2103_Novi
 2103_Novi_Permit Package_R1.cdr

Rev #	Req #	Date/Artist	Description	Rev #	Req #	Date/Artist	Description
Original	577177	02/04/26 CR					
Rev 1	585140	03/13/26 CR	Removed Signs E27 & E27a from site plan and booklet				

PRINTS ARE THE EXCLUSIVE PROPERTY OF STRATUS. THIS MATERIAL SHALL NOT BE USED, DUPLICATED, OR OTHERWISE REPRODUCED WITHOUT THE PRIOR WRITTEN CONSENT OF STRATUS.

E51

D/F NON-ILLUMINATED DIRECTIONAL - NON-BRANDED

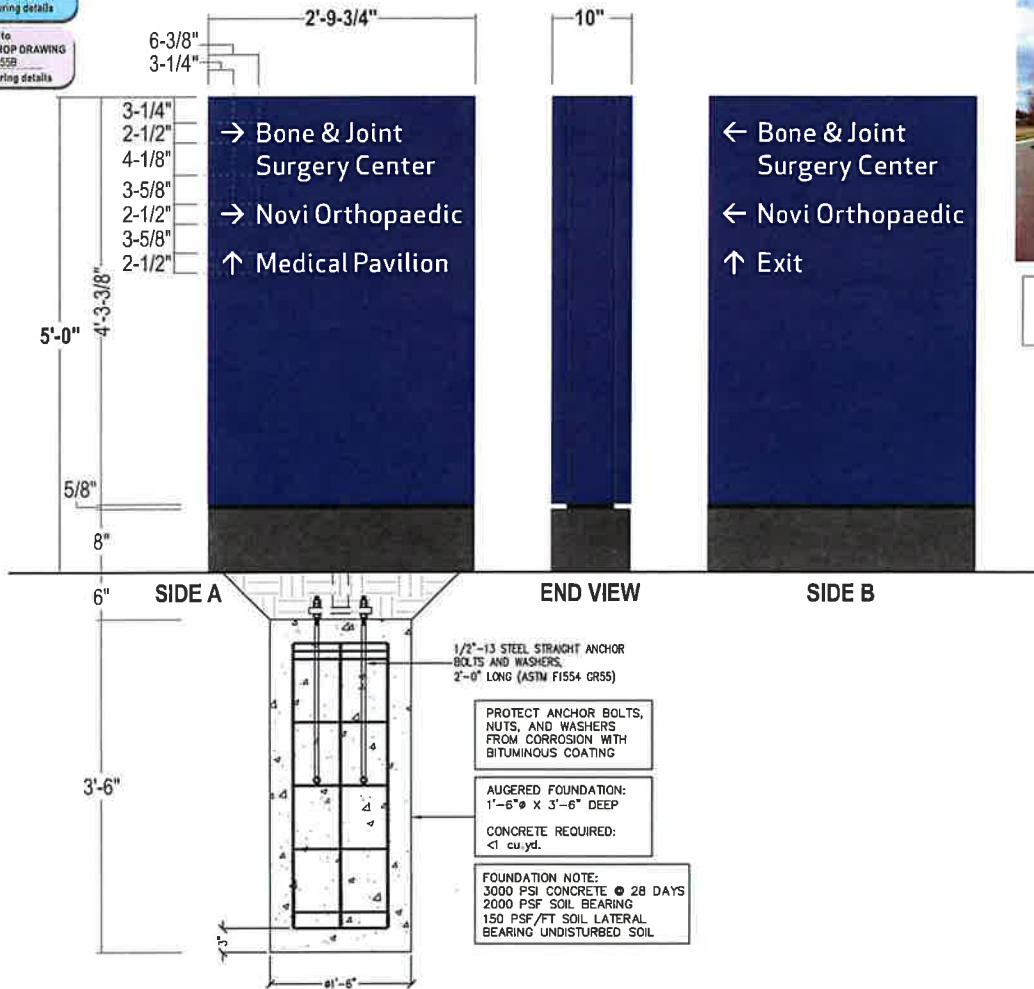
NBD-5-NIL

Scale: 3/4"=1'-0"

14.1 square feet

EXISTING SIGN SF:	-
PROPOSED SIGN SF:	14.1

refer to MAVEN CONTROL DOCUMENTS for manufacturing details
refer to PRODUCTION SHOP DRAWING # HF500559 for manufacturing details



Existing temporary "For Lease" sign to be removed & replaced



PROPOSED SIGNAGE
Scaled proportionately

- CABINET:** 10" deep aluminum angle sign frame w/ .125 alum. skin; Painted HFH Dk. Blue, semi-gloss finish
- FACES:** .125" Pan formed Aluminum faces all painted HFH Dk. Blue, semi-gloss finish Attached w/ stainless steel piano hinge for internal access
- GRAPHICS:** Surface applied Reflective vinyl graphics to match colors shown
- REVEAL:** Alum. Construction; Painted to match HFH Black, semi-gloss finish
- BASE:** .125" fab'd alum. construction; painted HFH Dk. Gray, semi-gloss finish One side to be removable for install access
- INSTALL:** Cabinet to have internal steel and will secure to concrete foundation using base plate 6" below grade - See Engineering for all details
- QUANTITY:** (1) ONE DIRECTIONAL SIGN REQUIRED

COLOR PALETTE

	Mathews MP 74601 R 211027; Semi-Gloss		3M 680-10 White Reflective
	Mathews MP 18243 R 212556; Semi-Gloss		Mathews MP 3091 Semi-Gloss

Paint finish to be semi-gloss unless otherwise specified

onestratus.com
8959 Tyler Boulevard
Mentor, Ohio 44060
888 503 1569

CLIENT: HENRY FORD HEALTH	ORDER NUMBER: 1236867	PROJECT NUMBER: 89324	Rev #	Req #	Date/Artist	Description	Rev #	Req #	Date/Artist	Description
ADDRESS: 26850 PROVIDENCE PKWY NOVI, MI 48374-1213	SITE NUMBER: 2103	PROJECT MANAGER: MERCEDES BURTON	Original	577177	02/04/26 CR					
PAGE NO.: 3	ELECTRONIC FILE NAME: K:\ACCOUNTS\H\Henry Ford Health System\Locations\2025\MI\2103_Novi\2103_Novi_Fermit Package_R1.cdr		Rev 1	585140	03/13/26 CR					

PRINTING THE EXCLUSIVE PROPERTY OF STRATUS. THIS MATERIAL SHALL NOT BE USED, DUPLICATED, OR OTHERWISE REPRODUCED WITHOUT THE PRIOR WRITTEN CONSENT.

E52 D/F NON-ILLUMINATED DIRECTIONAL - NON-BRANDED

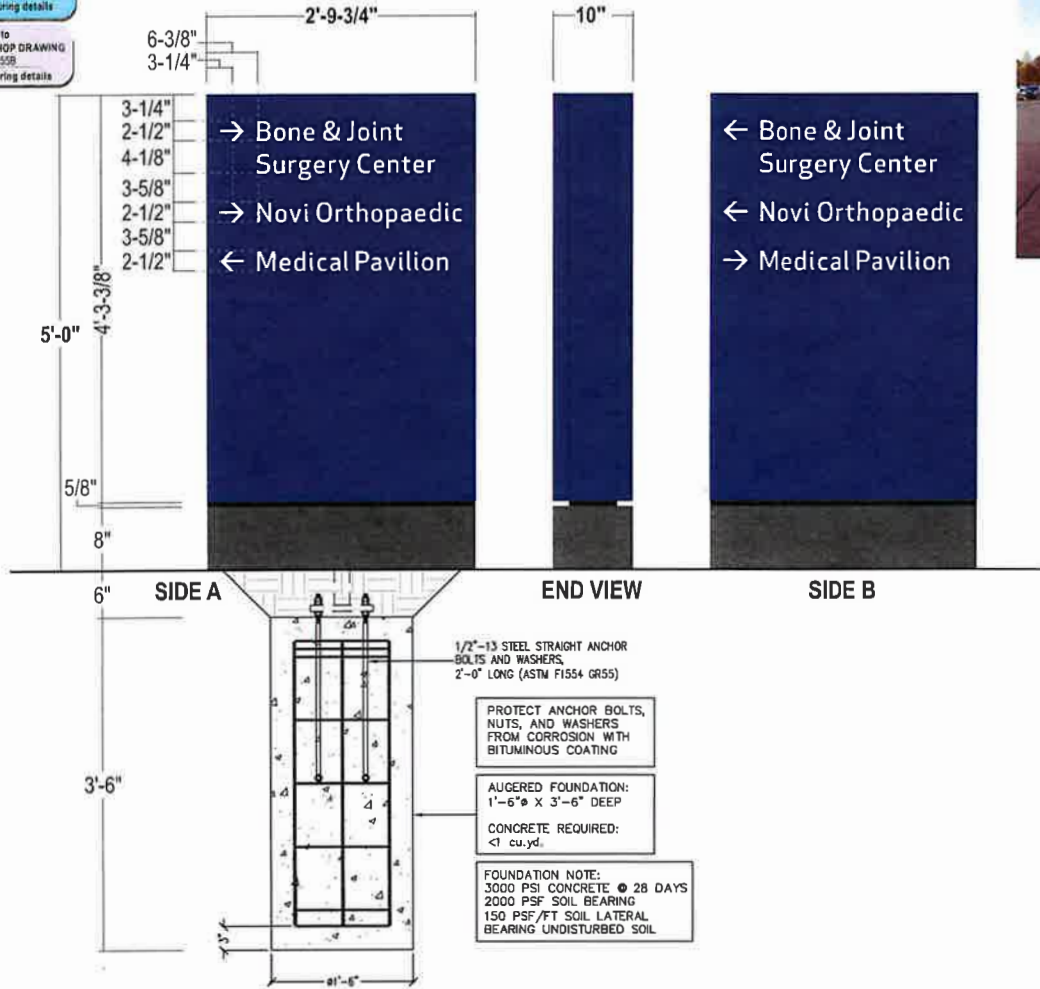
NBD-5-NIL

Scale: 3/4"=1'-0"

14.1 square feet

EXISTING SIGN SF:	-
PROPOSED SIGN SF:	14.1

refer to MAVEN CONTROL DOCUMENTS for manufacturing details
refer to PRODUCTION SHOP DRAWING # HFS0005B for manufacturing details



None Existing



PROPOSED SIGNAGE

Not to Scale - No Existing Sign to Provide Context for Scaling

- CABINET:** 10" deep aluminum angle sign frame w/ .125 alum. skin; Painted HFH Dk. Blue, semi-gloss finish
- FACES:** .125" Pan formed Aluminum faces all painted HFH Dk. Blue, semi-gloss finish Attached w/ stainless steel piano hinge for internal access
- GRAPHICS:** Surface applied Reflective vinyl graphics to match colors shown
- REVEAL:** Alum. Construction; Painted to match HFH Black, semi-gloss finish
- BASE:** .125" fab'd alum. construction; painted HFH Dk. Gray, semi-gloss finish One side to be removable for install access
- INSTALL:** Cabinet to have internal steel and will secure to concrete foundation using base plate 6" below grade - See Engineering for all details
- QUANTITY:** (1) ONE DIRECTIONAL SIGN REQUIRED

COLOR PALETTE

	Mathews MP 74601 R 211027; Semi-Gloss		3M 680-10 White Reflective
	Mathews MP 18243 R 212556; Semi-Gloss		Mathews MP 3091 Semi-Gloss

Paint finish to be semi-gloss unless otherwise specified

Stratus
onestratus.com
8859 Tyler Boulevard
Mentor, Ohio 44060
888.503.1569

CLIENT:
HENRY FORD HEALTH

ADDRESS:
26850 PROVIDENCE PKWY
NOVI, MI
48374-1213

PAGE NO.:
4

ORDER NUMBER:
1236867

SITE NUMBER:
2103

PROJECT NUMBER:
89324

PROJECT MANAGER:
MERCEDES BURTON

ELECTRONIC FILE NAME:
K:\ACCOUNTS\H\Henry Ford Health System\Locations\2025\MR2103_Novi
2103_Novi_Permit Package_R1.cdr

Rev #	Req #	Date/Artist	Description	Rev #	Req #	Date/Artist	Description
Original	577177	02/04/26 CR					
Rev 1	565140	03/13/26 CR					

PRINTS ARE THE EXCLUSIVE PROPERTY OF STRATUS. THIS MATERIAL SHALL NOT BE USED, DUPLICATED, OR OTHERWISE REPRODUCED WITHOUT THE PRIOR WRITTEN CONSENT OF STRATUS.