



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:** September 9, 2025

REGARDING: 24245 Karim Boulevard #50-22-24-476-019 (PZ25-0046)

BY: Alan Hall, Deputy Director Community Development

I. GENERAL INFORMATION:

Applicant

Illuum Cosmetic

Variance Type

Sign Variance

Property Characteristics

Zoning District: This property is zoned Office Service (OS-1)

Location: north of 10 mile Road, west of Haggerty Road

Parcel #: 50-22-24-476-019

Request

The applicant is requesting a variance from the City of Novi Sign Ordinance Section 28-5(a) to allow an additional wall sign for this tenant (1 sign allowed variance of 1). This property is zoned Office Service (OS-1).

II. STAFF COMMENTS:

The applicant is seeking a sign variance to allow an additional wall sign on the building.

This medical facility has two distinct entrances to the building (on opposing sides) requiring an additional sign for appropriate wayfinding regarding timely client traffic flow and reduced confusion.

III. RECOMMENDATION:

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

1. I move that we **grant** the variance in Case No. **PZ25-0046**, sought by _____, for _____ because Petitioner has shown practical difficulty requiring _____.
- (a) Without the variance Petitioner will be unreasonably prevented or limited with respect to use of the property because _____.
- (b) The property is unique because _____.
- (c) Petitioner did not create the condition because _____.
- (d) The relief granted will not unreasonably interfere with adjacent or surrounding properties because _____.
- (e) The relief is consistent with the spirit and intent of the ordinance because _____.
- (f) The variance granted is subject to:
1. _____.
 2. _____.
 3. _____.
 4. _____.

2. I move that we **deny** the variance in Case No. **PZ25-0046** sought by _____, for _____ because Petitioner has not shown practical difficulty requiring _____.

(a) The circumstances and features of the property including _____ are not unique because they exist generally throughout the City.

(b) The circumstances and features of the property relating to the variance request are self-created because _____.

(c) The failure to grant relief will result in mere inconvenience or inability to attain higher economic or financial return based on Petitioners statements that _____.

(d) The variance would result in interference with the adjacent and surrounding properties by _____.

(e) Granting the variance would be inconsistent with the spirit and intent of the ordinance to _____.

Should you have any further questions with regards to the matter please feel free to contact me at (248) 347-0417.

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

APPLICATION MUST BE FILLED OUT COMPLETELY

RECEIVED

JUL 24 2025

CITY OF NOVI
COMMUNITY DEVELOPMENT

I. PROPERTY INFORMATION (Address of subject ZBA Case)				Application Fee: \$ <u>330.00</u> Meeting Date: <u>9/9/25</u> ZBA Case #: <u>PZ 25-0046</u>	
PROJECT NAME / SUBDIVISION ILLUUM COSMETIC SURGERY					
ADDRESS 24245 KARIM BLVD				LOT/SUITE/SPACE #	
SIDWELL # 50-22-24 -476 -019		May be obtain from Assessing Department (248) 347-0485			
CROSS ROADS OF PROPERTY CORNER OF KARIM BLVD AND W. 10 MILE RD					
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 MELISSA@SIGNARAMA-FLINT.COM		CELL PHONE NO.	
NAME MARISSA CLAES		TELEPHONE NO. 810-230-6445			
ORGANIZATION/COMPANY STNJ, LLC (DBA SIGNARAMA FLINT & NOVI)		FAX NO. N/A			
ADDRESS 4297 MILLER RD		CITY FLINT		STATE MI	ZIP CODE 48507
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 GLAKIN@ILLUUMCOSMETICSURGERY.COM		CELL PHONE NO. 248-306-8656	
NAME DR. GREGORY LAKIN		TELEPHONE NO.			
ORGANIZATION/COMPANY GL KARIM PROPERTIES LLC		FAX NO. N/A			
ADDRESS 24245 KARIM BLVD		CITY NOVI		STATE MI	ZIP CODE 48375-2952
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>28-1</u>		Variance requested <u>SIGN VARIANCE: "DIMENSIONAL LETTERS" SIGN</u>			
2. Section _____		Variance requested <u>ABOVE THE SOUTH ENTRANCE OF BUILDING</u>			
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 • 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 or 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

Marissa Claos

Applicant Signature

7/9/2025

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.

Gregory Lakin

Property Owner Signature

07/09/2025

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



Community Development Department

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

REVIEW STANDARDS SIGN VARIANCE

The Zoning Board of Appeals (ZBA) will review the application package and determine if the proposed Sign Variance meets the required standards for approval. In the space below, and on additional paper if necessary, explain how the proposed project meets each of the following standards. (Increased costs associated with complying with the Zoning Ordinance will not be considered a basis for granting a Sign Variance.)

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.

☒ Not Applicable ☐ Applicable If applicable, describe below:

and/or

- 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.

☒ Not Applicable ☐ Applicable If applicable, describe below:

and/or

- 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.

☒ Not Applicable ☐ Applicable If applicable, describe below:

- 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).

☒ Not Applicable ☐ Applicable

If applicable, describe below:

- e. Not Self-Created.** Describe the immediate practical difficulty causing the need for the Variance was not created by the applicant or any person having an interest in the sign, sign structure, or property.

☐ Not Applicable ☒ Applicable

If applicable, describe below:

The subject property has a unique use and operational layout that creates an unusual need for additional wayfinding. This medical facility has two distinct entrances that serve different functions: one for Pre-Operative Services and one for Surgery & Post-Op Recovery. These two departments are functionally separate, with patients arriving at different times, often under time-sensitive or stressful conditions.

The physical layout of the building requires patients to approach from different directions depending

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 this variance would unreasonably restrict the tenant's ability to safely and efficiently guide patients to the correct entrance. The building is designed to serve multiple specialized medical functions, and effective signage is essential for patient care and safety. Failure to clearly label the Surgery & Post-Op entrance could lead to: patients or caregivers entering the wrong door, delays in care or scheduling, and unnecessary distress or confusion during medical procedures.

The proposed sign is not for advertising or promotion but rather for critical wayfinding. Without this variance, the tenant cannot fully use their space in a manner consistent with their medical services. This limitation

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.

Granting the variance will not negatively impact adjacent properties, the neighborhood, or the public interest. The proposed sign is: modest in size (only 6 inches in height), unlit and non-promotional, located directly above the appropriate doorway, and architecturally integrated and consistent with the building's appearance.

This sign does not increase the number of businesses advertised, nor does it compete with or detract from the existing business name and logo. It is strictly directional in nature and intended to reduce confusion and improve traffic flow within the site.

RECEIVED

JUL 24 2025

CITY OF NOVI
COMMUNITY DEVELOPMENT

 **illum**
COSMETIC SURGERY

24245





RECEIVED

JUL 24 2025

CITY OF NOVI
COMMUNITY DEVELOPMENT

**PVC STUD-MOUNTED
DIMENSIONAL LETTERS**

SIGN DETAILS

19MM Dimensional PVC Letters

CONCEPT PROOF

6.2 in

SURGERY & POST-OP

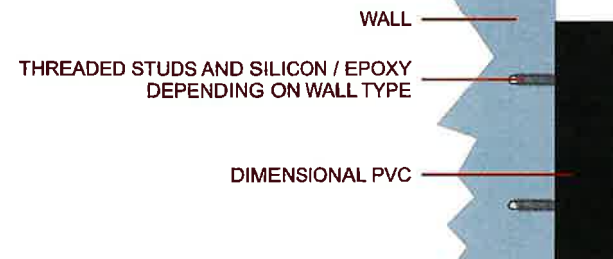
93 in

SIGNAGE ALLOWANCE: 65 SQ FT

EXISTING BUILDING SIGN: 61 SQFT

PROPOSED SIGN: 4 SQFT

ATTACHMENT DETAIL



RECEIVED

JUL 24 2025

SIGN DETAILS

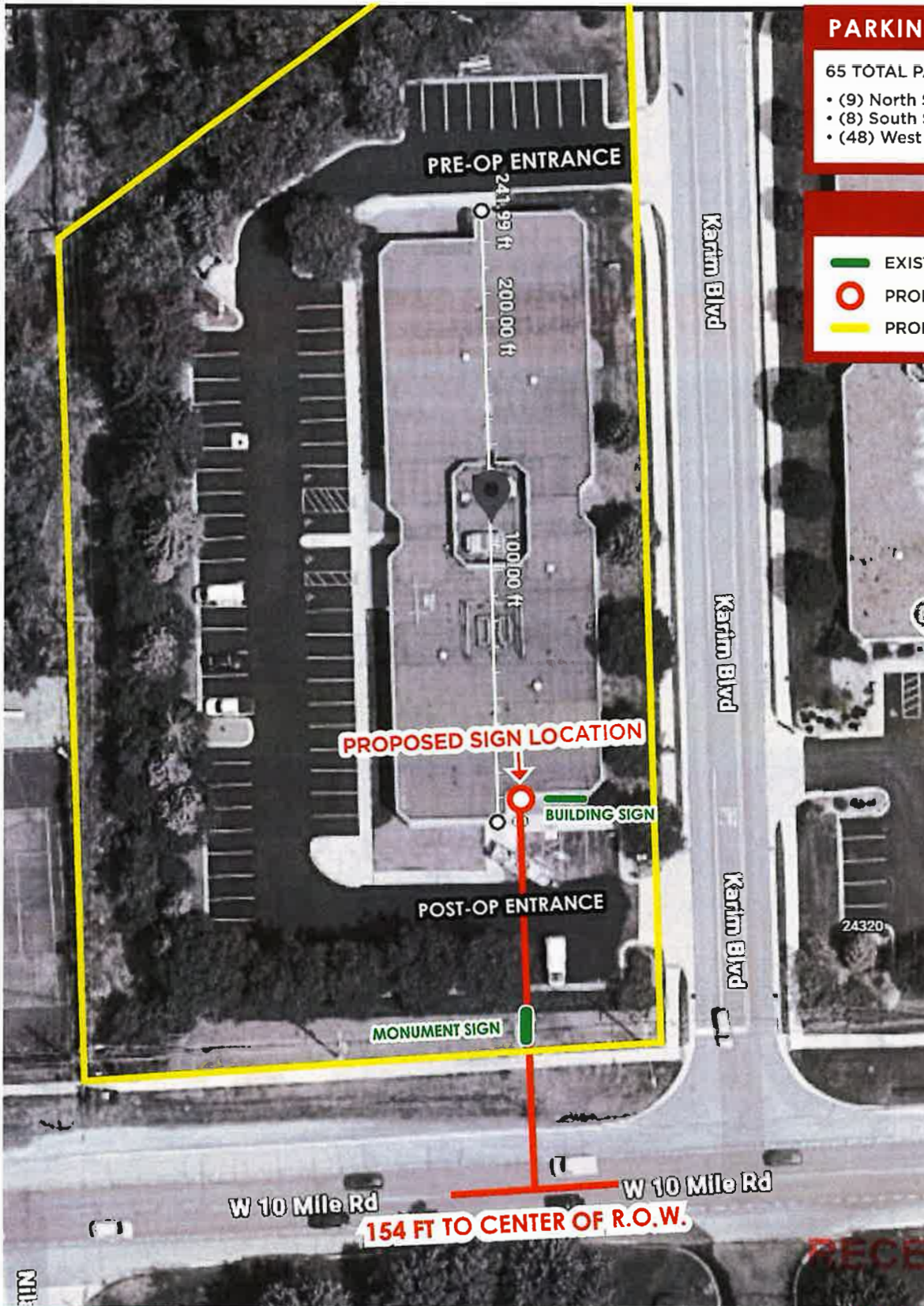
19MM Dimensional PVC Letters

CONCEPT PROOF

DIMENSIONAL LETTERING ABOVE ENTRANCE



6"H LETTERS PROPOSED ABOVE ENTRANCE DOORS



PARKING SPACES

65 TOTAL PARKING SPACES

- (9) North Side
- (8) South Side
- (48) West side

KEY

- EXISTING SIGNS
- PROPOSED SIGN
- PROPERTY LINE