Land Division and Boundary Adjustment Application Essex Township

Approval of a division of land is required before it is sold, when the new parcel is less than 40 acres (§102(c&1).

Essex Township still requires an application but it is not counted as a division for the Michigan Land Division Act

This form is designed to comply with applicable local zoning, land division ordinances and §109 of the Michigan Land Division Act (formerly the subdivision control act, P.A. 288 of 1967, as amended (particularly by P.A. 591 of 1996), MCL 56.101 et.seq.)

Boundary Adjustments in a Platted area are not subject to the Michigan Land Division Act

In the box below, fill in where you want this form sent, when the review is complete

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ame
ddress
ity/State/Zip
1. Location of parent parcel to be split
Address:Road Name
Parent parcel number:
Legal description of Parent Parcel or Lot and Subdivision (attach extra sheets if needed)

2.	Property Owner Information:
	Name:
	Address:
	City/State/Zip:
	Phone:
2	
3.	Applicant information (If not the property owner):
	Contact Name:
	Business Name:
	Address:
	City/State/Zip:
	Phone:
	A. Number of new Parcels B. Intended use (residential, commercial, etc.) C. The division of the parcel provides access to an existing public road by: (Please check one) each new division of the parcel provides assess to an existing public road. A new public road, proposed road name: (Road name can not duplicate an existing road name) A new private road or easement, proposed road name: (Road name can not duplicate an existing road name) A new easement (driveway) (Can not service more than one potential site.)
	. Legal Description of the proposed new road, easement or shared way. (Attach extra sheets if needed)
4b. Le	gal Description for each proposed new parcel (attach extra sheets if needed):

5a. Future Divisions that might be allowed but not included in this application?						
5b. The number of future divisions being transferred from the parent parcel to another parcel? Identify the other parcel:						
	09(2) of the Statute. Make sure your deed includes both statements as required in section 9(4) of the Statute.)					
6. Developm parcel;	ent Site Limits – Check each that represents a condition which exists on the parent					
Any P	art of the Parcel:					
	is in a DNR-designated critical sand dune area is riparian or littoral (It is a river or lake front parcel.) is affected by a Lake Michigan High Risk Erosion setback includes a wetland includes a beach is within a flood plain. includes slopes more than twenty five percent (a 1:4 pitch or 14" angle) or stepper is on muck soil or soils known to have severe limitations for on site sewage. is known or suspected to have an abandoned well, underground storage tank or contaminated soils.					
7. Attachment	s: (all attachments must be included) Letter each attachment as shown here.					
A	A survey sealed by a professional surveyor at a scale of (insert scale) of proposed division(s) of parent parcel:					
	2. A map/drawing to scale of (insert scale), of proposed division(s) of parent parcel:					

Please note: Record your Certified Survey with the County Register of Deeds

The survey must show:

- 1. Current boundaries, and
- 2. All previous divisions mad (indicate when made or none), and
- 3. The proposed division(s)
- 4. Dimensions of the proposed division(s), and
- 5. Existing and proposed road/easement right –of –way, and
- 6. Easements for public utilities from each parcel to existing public utility facilities,
- 7. Any existing improvements (buildings, wells, septic system, driveways, etc)
- 8. Any of the features checked in questions number 6.

<u>N/A</u> B	A soil evaluation or septic permit for each proposed parcel prepared by the health Department, or each proposed parcel is serviced by a public sewer system
<u>N/A</u> C	An evaluation/indication of approval will occur, or a well permit for potable water for each proposed parcel prepared by the Health Department, or indicates each proposed parcel is serviced by a public water system.
D	Indication of approval, or permit from County Road Commission or MDOT, for each proposed new road, easement, or shared driveway.
E	A copy of any transferred division rights (109(4) of the Act) in the parent parcel.
F	A fee of \$
Land Divisior	n and Boundary Adjustment Fees:
•	ents - Describe any existing improvements (buildings, well, septic, sewer lines, water lines, re on the parent parcel, or indicate none (attach extra sheets if needed):

9. Affidavit and permission for Essex Township, Clinton County, and State of Michigan to enter the property for inspections:

I agree the statements made above are true, and if found not to be true this application and any approval will be void. Further, I agree to comply with the municipality, county and the State of Michigan to enter the property where this parcel division is proposed for purposes of inspection to verify that the information on the application is correct at a time mutually agreed with the applicant. Finally, I understand this is only a parcel division which conveys only certain rights under the applicable local land division ordinance, the local zoning ordinance, and the State Land Division Act (formerly the Subdivision Control Act, PA 288 of 1967, as amended (particularly by PA 591 of 1996), MCL 560.101 et.seq.) and

does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights.

Finally even if the division is approved, I understand zoning, local ordinance and State Acts change form time to time, and if changed the division made here must comply with the new requirements (apply for division approval again) unless deeds, land contracts, leases or surveys representing the approved divisions are recorded with the Register of Deeds or the division is built upon before the changes to laws are made.

Land Division and Boundary Adjustment Fees:
\$200.00 application fee for parent parcel and one parcel, plus \$50.00 for each additional parcel.

Property Owner's Signature:

Date: ______

Mail Completed Forms to:

You must answer all questions and include all attachments, or this application will be returned to you.

PO Box 90
Bath, MI 48808
(517) 204-3752

Reviewer's Action		
Planning and Zoning:		
Approved: Cond	litions, if any	
Denied: Reason		
Signature and Date:		
	Planning and Zoning Administrator	
Signature and Date:		
	Beth Botke Essex Township Assessor	