

GRANT TOWNSHIP LAND DIVISION APPLICATION

Application can not be processed until all questions are answered and all attachments have been provided.

Name: _____ Address _____
City _____ State _____ Zip _____

LOCATION OF PARENT PARCEL TO BE SPLIT:

Address: _____ Road Name: _____

Parent Parcel Number: _____ - _____ - _____ - _____ - _____

Legal description of parent parcel:

1) PROPERTY OWNER INFORMATION:

Name: _____ Phone: _____

Address: _____ Street Name: _____

City: _____ State: _____ Zip code: _____

2) APPLICATION INFORMATION:

Contact person=s name: _____

Business name: _____ Phone: _____

Address: _____ Street name: _____

City: _____ State: _____ Zip code: _____

4) PROPOSAL:

A. Total number of parcels _____

B. Intend use: _____

C. The division of the parcel provides access to an existing public road by:

_____ Each new division has frontage on an existing public road

_____ A new public road, proposed road name: _____

_____ A new private road, or easement, proposed road name: _____

_____ A recorded easement

Write here, or attach, a legal description of the proposed new road, easement or shared driveway:

Write here, or attach, a legal description for each proposed new parcel:

5) FUTURE DIVISIONS:

A. List any future divisions that might be allowed but not included in this application:

B. The number of future divisions being transferred from the parent parcel to another Identify the other parcel:

6) DEVELOPMENT SITE LIMITS:

Any part of the parent parcel:

_____ is in a DNR designed 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 beach

_____ includes a wetland

_____ is within a flood plain

_____ includes slopes more than twenty five percent (a1:4 pitch or 14*angle) or steeper

_____ is on muck soils or known to have severe limitations for on site sewage systems

_____ is known or suspected to have an abandoned well, underground storage tank or Contaminated soils.

7) ATTACHMENTS:

- _____A. 1.A survey, sealed by a professional surveyor at a scale of, of a Proposed division(s) of parent parcel OR
- 2.A map/drawing drawn to scale of _____, of proposed division(s) of Parent parcel and the 30day time limit is waved: Signature: _____

The survey or map must show:

- 1. Current boundaries (as of March 31, 1997), and
- 2. All previous divisions made after March 31,1997(date), and
- 3. The proposed division(s), and
- 4. Dimensions of the proposed divisions, and
- 5. Existing and proposed road/easement rights of way, and
- 6. Easements for public utilities from each parcel to existing public utility facilities, and
- 7. Any existing improvements (buildings, wells, septic system, driveways)
- 8. Any of the features checked in question number 6

- _____B. A soil evaluation or septic system permit for each proposed parcel prepared by the Health Department, or each proposed parcel is serviced by a public sewers system.
- _____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 each proposed parcel is serviced by a public water system.
- _____D. Indication of approval, or permit from County Road Commission, MDOT, respective city/village street administrator, for each proposed new road, easement or shared driveway
- _____E. A COPY OF DEED and along with division rights transferred with purchase of parcel.
- _____F. Application fee of \$125.00 - **MADE PAYABLE TO GRANT TOWNSHIP**
- _____G. **A certificate of paid taxes for the preceding 5 years from the Clare County Treasurer.**

4. Describe any existing improvements (building, well, septic, etc.) Which are on the parent parcel, or indicate none:

5. AFFIDAVIT AND PERMISSION for municipal, county and state officials to enter the property for inspection: 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 conditions and regulations provided with this parent parcel division. Further, I agree to give permission for an official of the municipality, county and the State of Michigan to enter the property where this parcel divisions is proposed for purposed 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 applicable local land division ordinance, the local zoning ordinance, and the State Land Division Act (formerly the Subdivision Control Act), P.A.288 of 1967, as amended (particularly by P.A.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 this division is approved, I understand zoning, local ordinances and State Acts change from time to time, and if changed the divisions 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.

PROPERTY OWNER'S SIGNATURE: _____ DATE: ___/___/___

DO NOT WRITE BELOW THIS LINE

Reviewer=s action:

_____ Approved: Conditions: _____

_____ Denied: Reason for denial: _____

Signature: _____ Date: ___/___/___

PLEASE RETURN APPLICATION AND FEE TO: ZACK VANWORMER
GRANT TOWNSHIP ASSESSOR
P.O. BOX 208
CLARE, MI 48617
PHONE:(989) 389-0841
EMAIL MVWASSESSING@GMAIL.COM

OR DROP OFF AT THE GRANT TWP HALL DROP BOX