

FORSYTH TOWNSHIP

LAND DIVISION APPLICATION

You **MUST** answer all questions and include all attachments, or this will be returned to you. Bring or mail to: **Forsyth Township Assessor, P O Box 1360, 186 W. Flint St, Gwinn, Mi. 49841**

Approval of a division of land is required before it is sold, when the new parcel is less than 40 acres and not just a property line adjustment (§102 e & f).

In the box below, fill in where you want this form set, when the review is completed

_____ name
_____ address
_____ city, state, zip

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 and P.A. 87 of 1997, MCL560.101 et.seq). (

Approval of division is not a determination that the resulting parcels comply with other ordinances or regulations.)

Number of splits allowed by Statute: _____
Parcel Number _____
Name: _____
Date: _____
Control Number _____

1. LOCATION of parent parcel to be split:

Address: _____ Road Name: _____
Parent parcel number: _____
Legal description of Parent Parcel (attach extra sheets if needed): _____

Township, City or Village Name: _____

2. PROPERTY OWNER information:

Name: _____ Phone: (_____) _____
Address: _____ Road Name: _____
City: _____ State: _____ Zip Code: _____

3. APPLICANT information (if not the property owner):

Contact Person's Name: _____
Business Name: _____ Phone: (_____) _____
Address: _____ Road Name: _____
City: _____ State: _____ Zip Code: _____

4. PROPOSAL: Describe the division(s) being proposed:

- A. Number of new Parcels _____
- B. Intended use (residential, commercial, etc.) _____
- C. Each proposed parcel of 10 acres or less, has a depth to width of 4 to 1 or _____ to _____ as provided by ordinance.
- D. Each parcel has a width of _____ (not less than required by ordinance)
- E. Each parcel has an area of _____ (not less than required by ordinance)
- F. The division of each parcel provides access as follows: (check one)
_____ Each new division has frontage on an existing public road. _____
_____ A new public road, proposed name: _____ (Road Name)
_____ A new private road or easement, proposed road name: _____ (Road Name can not duplicate an existing road name.)

G. Describe or attach, a legal description of the proposed new road, easement or shared driveway (attach extra sheets if needed): _____

H. Describe or attach, a legal description for each proposed new parcel (attach extra sheets if needed): _____

5A. 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 parcel? _____
Identify the other parcel: _____
(See section 109(2) of the Statute. Make sure your deed included both statements as required in Section 109(3) and 109(4) of the Statute.)

6. DEVELOPMENT SITE LIMITS (Check each that represents a condition which exists on the parent parcel.)
_____ Waterfront property (river, lake, pond etc.) _____ Includes wetlands
_____ Is within a flood plain _____ Includes a beach
_____ Is on muck soils or soils known to have severe limitations for a site sewage system.

7. ATTACHMENTS - All the following attachments **MUST** be included. Letter each attachment as shown:

A. A scale drawing that complies with the requirements of P.A. 132 of 1970 as amended for the proposed divisions(s) of the parent parcel showing:

- (1) current boundaries (as of March 31, 1997), and
- (2) all previous divisions made after March 31, 1997 (indicate when made or none), and
- (3) the proposed divisions(s), and
- (4) dimensions of the proposed divisions, and
- (5) existing and proposed road/easement right-of-way(s), and
- (6) easements for public utilities from each parcel that is a development site to existing public utility facilities, and
- (7) any existing improvements (buildings, wells, septic system, driveways, etc.)
- (8) any of the features checked in questions number 5.

B. Indication of approval, or permit from Marquette County Road Commission or MDOT that a proposed easement provides vehicular access to an existing road or street meets applicable location standards.

C. A copy of any reserved division rights (§109(4) of the act) in the parent parcel.

D. A fee of \$ _____

8. IMPROVEMENTS Describe any existing improvements (buildings, well, septic, etc.) which are on the parent parcel or indicate none (attach extra sheets if needed): _____

9. AFFIDAVIT and permission for municipal, county and state officials 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 conditions and regulations provided with this parent parcel division. Further, I agree to give permission for official: _____ of the municipality, county and the State of Michigan to enter the property where this parcel division is proposed for purposes of inspections 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, P.A. 288 of 1967, as amended (particularly by P.A. 591 OF 1996 and P.A. 87 OF 1997), 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, lease: _____ 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 Owners Signature _____ **Date:** _____

DO NOT WRITE BELOW THIS LINE:

Reviewer's action:

TOTAL \$ _____ Receipt # _____

Approved: Conditions, if any:

Denied: Reasons (cite §):

Signature and date: _____