

# Home Township

## Lot Line Adjustment/Land Division Application

Applicant: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone/Email: \_\_\_\_\_

Owner: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone/Email: \_\_\_\_\_

Parent Parcel Number: \_\_\_\_\_

Parent Parcel Address: \_\_\_\_\_

Is any portion of the parcel in PA 116? (If yes, please provide paperwork for release of PA 116) \_\_\_\_\_

Are there any mortgages or liens on the parcel? (If yes, please provide documentation of discharge) \_\_\_\_\_

If you are requesting an approval letter, please provide the contact information for letter (may be yourself, title company, realtor, etc):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone/Email: \_\_\_\_\_

This form is designed to comply with applicable local zoning, land division ordinances and section 108 & 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, MCL 560.101 ET SEG.)

Please provide the following information to process the requested Land Division:

- **Montcalm County – Certificate of Paid Taxes**
  - The Montcalm County Treasurer’s Office can supply you with a copy of this certificate. The County charges \$5 for each copy.
  - The certificate verifies that all property taxes for the 5 years preceding the current date have been paid
  - All taxes must be paid in full. If the parcel has any delinquent taxes or liens, the request for the land division will not occur the following year.
  
- **A Certified Survey and Legal descriptions of all properties affected by land division/adjustment**
  - The survey must show the following items:
    - All existing improvements (buildings, driveways, outbuildings, etc)
    - Existing easements or proposed easements
    - Legal descriptions for proposed parcels and remaining land
  - How far from lot lines are buildings?
    - North Line \_\_\_\_\_ South Line \_\_\_\_\_
    - West Line \_\_\_\_\_ East Line \_\_\_\_\_
  
- Copy of the recorded deed when the property was originally purchased
- All parcels must meet zoning requirements/ordinances (if any)
- NO LAND LOCKED PARCELS MAY BE CREATED
- Maximum of 4 to 1 Depth Ratio
- Please be aware that with a land division approval this does not qualify any or all new parcel(s) will be buildable

Permission for municipal 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. I agree to give permission for officials of the municipality, county and state to enter the property where this parcel division is proposed for purpose of inspection. I understand local ordinances and State Acts change from time to time and must comply with new requirements unless built upon before the changes or laws are made.

**\*\*Please be aware land divisions may take up to 45 days to be approved. In some cases, zoning administrator may have to inspect property, research may be needed, verification that property meets other requirements and/or ordinances. The Township Board has final approval of land division application\*\***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Application Fee is \$35.00 for 1 new parcel; \$10.00 for each new additional parcel

Application Fee to be paid to the Township.

Completed Forms can be returned to:

Home Township Office in person;

or by mail : Home Township Assessor P.O. Box 470, Edmore MI 48829

Or by email: boundaryassessing@gmail.com

APPROVAL OF THIS APPLICATION IS NOT A DETERMINATION THAT THE  
RESULTING PARCELS COMPY WITH OTHER ORDINANCES OR REGULATIONS

**FOR TOWNSHIP USE ONLY, DO NOT WRITE BELOW THIS LINE**

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Application completion date: \_\_\_\_\_

Fee: \$35.00 for 1 new parcel \$10.00 for each new additional parcel

Application Fee Received: Date \_\_\_\_\_ Amount: \_\_\_\_\_

Check Number: \_\_\_\_\_ Taken By: \_\_\_\_\_

\_\_\_\_\_ APPROVED, by Township Board

Contingent on \_\_\_\_\_

\_\_\_\_\_ DENIED, by Township Board

Due to: \_\_\_\_\_

Assessor: \_\_\_\_\_ Date \_\_\_\_\_

Zone District: \_\_\_\_\_

Zoning Administrator: \_\_\_\_\_ Date \_\_\_\_\_

Outstanding taxes: \_\_\_\_\_ (as of \_\_\_\_\_)

Township Treasurer: \_\_\_\_\_ Date \_\_\_\_\_