

UNION TOWNSHIP PARCEL DIVISION APPLICATION

5460 Choctaw Ct. , Gaylord MI 49735 – (989-350-8590)

You must answer ALL questions and include all attachments, or this will be returned to you. Mail to UNION TOWNSHIP at the above address.

***Approval of a division of land is required before it is sold, when a new parcel is less than 40 acres and not just a property line adjustment (560.102(e) & (f) & 560.264.**

This form is designed to comply with Sec. 108 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 PA 87 of 1997) MCI 560 et.seq.)

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

1. LOCATION of PARENT to be split: Address: _____ Road Name _____
PARENT PARCEL NUMBER: 28- 12- _____ - _____ - _____
Parent Parcel Legal Description (DESCRIBE OR ATTACH) _____

2. PROPERTY OWNER INFORMATION:

Name: _____
Address: _____
Phone: _____ (Zip Code) _____
Email: _____

3. APPLICANT INFORMATION (If not the property owner)

Name: _____
Address: _____
Phone: _____ (Zip Code) _____
Email: _____

4. PROPOSED DIVISION(S) TO INCLUDE THE FOLLOWING:

- A. Parent parcel size prior to this proposed split _____
- B. Number of new Parcels _____
- C. Intended use (residential, commercial, etc.) _____
- D. The division of the parcel provides access as follows: (check one)
 - ___ a) Each new division has frontage on an existing public road.
 - ___ b) A new public road, proposed road name: _____
Road name can not duplicate an existing road name.
 - ___ c) A new private road, proposed road name: _____
- E. A recorded easement - (Describe or attach a legal description of proposed new road, easement or shared driveway) _____
- F. Describe or attach a legal description for each **proposed new parcel** _____
- G. Each proposed parcel has a depth to width ratio not to exceed a 3 to 1 ratio (per Township Ordinance).
- H. Each proposed division conforms to one of the following minimum area requirements: (check one)
 - ___ 1) Forest Residential: Area: (5 Acres) Width: 250'
 - ___ 2) Lakeside Residential: (Per Article VII, sec.7.10.2 & Article IX sec.9.13.1 of the Union Township Zoning Ordinance.

5 FUTURE DIVISIONS being transferred from the parent parcel to another parcel. Indicate number transferred _____
(See section 109 (2) of the Statute. Make sure your deed includes both statements as required in 190 (3 & 4) of the Statute.)

6. DEVELOPMENT SITE LIMITS (Check each which represent a condition which exists on the parent parcel:

- ⇒ _____ Waterfront property (river, lake, pond etc.) _____ Includes wetlands
⇒ _____ Includes a beach _____ Is within a flood plain
⇒ _____ Is on muck soils or soils known to have severe limitations for on site sewage system
⇒ _____ is known or suspected to have an abandoned well, underground storage

Note: Applicants should be aware that since 1992 Grand Traverse County has adopted a Soil Erosion Water Runoff Control Ordinance, which may affect your proposed land division. If three or more building sites are served by easement or private road, it would be in your best interest to submit a copy of your proposed survey to the Grand Traverse County Drain Commissioners Office for a preliminary review before any road or easement construction

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

- * A A survey that complies with the requirements of P.A. 132 of 1970 as amended for the proposed division(s) of the parent parcel showing:
 - (1) Current boundaries (as of March 31, 1997)
 - (2) All previous divisions made after March 31, 1997 (indicate when made or none)
 - (3) The proposed division(s)
 - (4) Dimensions of the proposed divisions,
 - (5) Existing and proposed road/easement right-of-way(s)
 - (6) Easements for public utilities from each parcel 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 6.
- C. A fee of - **\$100.00.** for the first parcel division and **\$25.00** for each additional parcel. Make check payable to "Union Township," mail to Assessor, 5460 Choctaw Ct. Gaylord, MI. 49735. Or. Fees can also be paid online at: <https://uniontownshipgt.com/zoning-1> Scroll to the bottom of the page and follow the instructions. Once you receive payment confirmation, email confirmation with completed application to wwassessor@yahoo.com for review.
- * D Indication of approval, or permit from Grand Traverse County Road Commission, for each proposed new driveway, road, easement or shared driveway. **Phone (231)292-4848.**
- * E. Land Division Tax Payment Certification Grand Traverse County Treasurer. **Phone (231) 922-4735.**
- * F. A copy of any reserved division rights (sec. 109 (4) of the act) in the parent parcel.
- * G. Proof of fee ownership of land.
- * H. History and specifications of any previous divisions of Parcel to be divided to establish lawful existence as of March 31, 1997.

8. IMPROVEMENTS - Describe any existing improvements (buildings, well, septic, etc., which are on the parent parcel or indicate none). _____

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 officials of the municipality, county and the State of Michigan to enter the property where this parcel division is proposed for purposes of inspection. Finally, I understand this is only a parcel division which conveys only certain rights under the applicable local land division 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 PA 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 restrictions or other property rights.

Property Owner's Signature _____ Date: _____

DO NOT WRITE BELOW THIS LINE

For office use only - Reviewer's action:

Application Completed: Date _____ Application Fee _____ Ck No. _____

_____ Approved: Conditions, if any: _____

_____ Denied: Reasons (cite Sec.): _____

Signature: Township Assessor _____ Date Approved: _____

Township Zoning Administrator _____ Date Approved: _____

NOTICE TO ASSESSOR OF TRANSFER OF THE RIGHT TO MAKE A DIVISION OF LAND

Issued under authority of Land Division Act (P.A. 288 of 1967 as amended by P.A. 87 of 1997) . Filing is mandatory.

This form must be filed by an owner of a parent parcel or parent tract of land when the owner creates a parcel from the parent parcel or parent tract and transfers the right to make a further division to the owner of the created parcel. This form must be filed within 45 days of the transfer of the right to make a division. This form must be filed with the assessor of the city or township where the property is located.

1. Street Address of Parent Parcel or Parent Tract		2. County	4. Date of Transfer of Right to Make a Division
3. City/Township/Village Where Real Estate is Located		☐ City ☐ Township ☐ Village	
5. Property Identification Number (PIN) of Parent Parcel or Parent Tract. If you don't have a PIN, attach legal description.			
6. Name of Owner of Parent Parcel or Parent Tract		Address of Owner of Parent Parcel or Parent Tract	
7. Property Identification Number (PIN) of Created Parcel if PIN has already been assigned.			
8. Name of Owner of Created Parcel		Address of Owner of Created Parcel	

PIN, this number ranges from 10 to 25 digits. It usually includes hyphens and sometimes includes letters. It is on the property tax bill and on the assessment notice.

THE FOLLOWING QUESTIONS MUST BE ANSWERED.

1. Did the parent parcel or parent tract have any unallocated divisions under the Land Division Act, P.A. 288 of 1967, MCL 560.101 to 560.293? Check appropriate box below:

☐ YES

☐ NO

If the YES box was checked, go to question 2. If the NO box was checked, go to question 3.

2. How many unallocated divisions did the parent parcel or parent tract have prior to this transfer?

Enter number here _____.

3. Were there any unallocated divisions transferred to the newly created parcel?

☐ YES

☐ NO

If the YES box was checked, go to question 4. If the NO box was checked, go to the signature area of the form.

4. How many unallocated divisions were transferred to the newly created parcel? Enter number here _____.

CERTIFICATION

I certify that the information above is true and complete to the best of my knowledge.

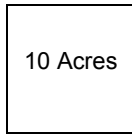
Signature of Owner of Parent Parcel or Parent Tract	Date	If Signer is other than the owner, print name and title
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INSTRUCTIONS

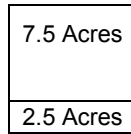
This form must be filed by an owner of a parent parcel or parent tract of land when the owner creates a parcel from the parent parcel or parent tract and transfers the right to make a further division(s) to the owner of the created parcel.

Example: The owner of a parent parcel 10 acres in size is selling off a created parcel 2 1/2 acres in size. In this example the 10 acre parent parcel qualifies under the Land Division Act to make four (4) divisions before platting is required. Therefore, two (2) more divisions may be made before platting is required.

Parent Parcel
Before Sale



After Sale



The owner of the parent parcel who sold the 2 1/2 acre parcel can keep the authority to make two (2) additional divisions or may convey the authority to make one or both of the additional divisions to the owner of the created parcel.

If the owner of the parent parcel conveys the authority to make one or both additional divisions to the owner of the 2 1/2 acre created parcel, this form (L-4260a) must be filed with the local assessor within 45 days of that action.

This form must also be filed when the owner of a parent parcel or parent tract conveys the parent parcel or parent tract, and also transfers the right to make further divisions to the new owner of the parent parcel or parent tract.

For more information about the Land Division Act, you may contact the Subdivision Control Section of the Department of Consumer and Industry Services at (517) 334-7750.

Excerpt from P.A. 87 of 1997

Sec. 109(2) The right to make divisions exempt from the platting requirements of the act under section 108 and this section can be transferred, but only from a parent parcel or parent tract to a parcel created from that parent parcel or parent tract. A proprietor transferring the right to make a division pursuant to this subsection shall within 45 days give written notice of the transfer to the assessor of the city or township where the property is located on the form prescribed by the state tax commission under section 27a of the general property tax act, P.A. 206 of 1893, MCL, 211.27a. The state tax commission shall revise the form to include substantially the following questions in the mandatory information portion of the form:

(a) "Did the parent parcel or parent tract have any unallocated divisions under the land division act, P.A. 288 of 1967, MCL 560.101 to 560.293? If so, how many?"

(b) "Were any unallocated divisions transferred to the newly created parcel? If so, how many?"

GRAND TRAVERSE COUNTY ROAD COMMISSION

1881 LaFranier Road, Traverse City, MI 49686

231.922.4848 – Phone /231.929.1836 – Fax

Land Division Review Application

Date: _____

Application No: LD _____

Owner Information

Owner's Name: _____

Owner's Address: _____

Phone No: _____ Fax No: _____ Email: _____

Owner's Signature: _____

Applicant/Authorized Agent Information Check if same as above _____

Applicant's Name: _____

Applicant's Address: _____

Phone No: _____ Fax No: _____ Email: _____

Applicant/Authorized Agent Signature: _____

Property Information

Parent Parcel Identification Number: 28-_____

Township Name: _____ Section: _____ Township: _____ Range: _____

Public Road Name: _____ Private Road Name: _____

Number of Proposed Divisions: _____ Number of Divisions Available: _____

The following items must be supplied for the application to be considered complete for review:

(All items must be checked and initialed prior to acceptance of application)

- ☐ _____ Complete Application Form.
- ☐ _____ Payment of Land Division Review Application fee (\$50 for first division + \$30.00 for each additional parcel (minimum \$80.00).
- ☐ _____ Certificate of Survey prepared by a Professional Surveyor (including legal descriptions).
- ☐ _____ Copy of deed (or other document recorded in the GTC Register of Deeds proving ownership of parcel being divided). NOTE: GTC EQUALIZATION PARCEL SHEETS ARE NOT ACCEPTABLE AS PROOF OF OWNERSHIP
- ☐ _____ Field staking of proposed land division corners (proposed front/roadside parcel corners only) and preferred driveway location. (Show driveway location on sketch.)
- ☐ _____ Sight distance shall be indicated as distance from center of driveway on above mentioned sketch.

PLEASE NOTE

For sight distance requirements see the Grand Traverse County Road Commission Right of Way Permitting and Public Road Standards, Rules, Specifications and Guidelines.

Upon completion of the Land Division Application review, the GTCRC will mail a letter of recommendation to the applicable Township Assessor.

OFFICE USE ONLY

Payment Type: Credit Card: _____ Cash: _____ Check: _____

Receipt: _____ Date: _____



**HEIDI M. SCHEPPE, MBA, CPFO
GRAND TRAVERSE COUNTY TREASURER**

400 BOARDMAN AVENUE, SUITE 104
TRAVERSE CITY, MI 49684-2577
(231) 922-4735 • FAX (231) 922-4658
E-MAIL: TREASURER@GRANDTRAVERSE.ORG

**Land Division Tax Payment Certification
PART 1: TO BE COMPLETED BY PROPERTY OWNER OR ASSESSOR**

Name: _____ Phone: _____

Owner Address: _____

Owner City, State, Zip: _____

Property Address: _____

Property City, State, Zip: _____

Current Year & 5 years preceding Parcel ID number'(s): _____

_____, _____, _____
*** PLEASE ATTACHED MOST RECENT TAX BILL OR DEED OF PARENT PARCEL(S)***

PART 2: TO BE COMPLETED BY GIS/EQUALIZATION DEPARTMENT

Verification by GIS/Treasurer Name: _____

Parcel ID number'(s) verified with legal description attached: _____

_____, _____, _____

PART 3: TO BE COMPLETED BY COUNTY TREASURER'S OFFICE

[] CERTIFICATION DENIED

The Grand Traverse County Treasurer's Office has found delinquent taxes on the parcel listed above and cannot issue a certification of tax payment.

Delinquent Taxes Owed: \$ SEE ATTACHED BILL FOR PAYOFF

[] CERTIFICATION APPROVED

Pursuant to PA 23 of 2019, the Grand Traverse County Treasurer's Office certifies that all property taxes and special assessments due on the above referenced parcel subject to the proposed division for five years preceding the date of the application have been paid. This certification does not include taxes or special assessments, if any, now in the process of collection by the City, Village or Township Treasurer.

Certified by: _____ Date: _____

Certification Fee \$5.00 minimum to be paid to County Treasurer at time of certification.