

Charter Township of Grayling

2090 Viking Way PO Box 521

Grayling, MI 49738

Tel: (989) 348-4361 Fax: (989) 348-6713

Application for Land Division/Boundary Adjustment

In accordance with the Michigan Land Division Act
(Formerly the Michigan Subdivision Control Act, P.A. 288 of 1967)

LAND DIVISION/SPLIT (to be filled out by applicant)

Application Date _____

PROPERTY OWNER INFORMATION

Name of Property owner(s) _____

Address _____

City/State/ Zip _____

Preferred phone number (____) _____

Email address _____

PARCEL (PARENT) TO BE SPLIT INFORMATION

Parent parcel property tax ID number 040-_____

Location (address) of parent parcel _____

Current zoning of parent parcel _____

Parent parcel legal description Twp.# _____ Range# _____ Section# _____

PROPOSED DIVISION(S) INFORMATION

Number of new parcels requested _____

Means of access to new parcel(s)

Driveway off adjacent public road _____

Easement across other private property _____

Name of adjacent road _____

Name(s) of private property owners whose property easement will cross

FUTURE DIVISIONS/SPLITS

If you are transferring future division rights from the parent parcel to child (split) parcels, please indicated how many divisions you are transferring to each parcel (This information must be included on the deeds for each parcel, when a new deed is created or it will not be valid)

Parcel# _____ # of future divisions _____

Parcel# _____ # of future divisions _____

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Parcel# _____ # of future divisions _____

ATTACHMENTS

A. _____ Survey done within the prior 6-months showing each proposed division, legal descriptions of each, all easements to each parcel, all current buildings, roads, rivers/lakes, and any other outstanding features.

B. _____ Copy of warranty deed showing proof of ownership.

C. _____ Crawford County Treasurer Tax Certification verifying there are no delinquent property taxes for the prior five (5) years.

D. _____ Short letter giving township officials permission to enter the property for inspection purposes (does not include permission to enter buildings).

PROPERTY OWNER ACKNOWLEDGEMENT

I agree that the statements made above are true to the best of my understanding. If found to not be true, this application and any approval will be void.

I understand that it is my responsibility to ensure and provide proof that all aspects of the Michigan Land Division Act have been strictly followed prior to submitting this application.

I agree to comply with conditions and regulations provided in the Michigan Land Division Act concerning this division, and have followed all such regulations and conditions in submitting this application regarding number of divisions and future rights to divide all parcels. Further, I agree that both parent and child parcels do and will comply with any other local or state regulations, statutes, and ordinances currently in place and that this division does not include any representation or conveyance of rights in any other statute, ordinance, deed restriction or other property rights.

I agree that any outstanding special assessments will remain with the parent parcel and that future special assessment adjustments could be applied to one or all the divisions.

If approved, I agree to register this division with the Crawford County Register of Deeds.

Signature of applicant _____ Date _____

*For Land Division, a non-refundable fee of \$75.00 for each newly created parcel (including Parent) must accompany the application in order for it to be accepted for review by Grayling Township.

THIS SECTION TO BE FILLED OUT BY GRAYLING CHARTER TOWNSHIP OFFICIALS

Accepted for review by _____

Date of acceptance _____

Date division must be approved or denied (date of acceptance + 45 days) _____

Division(s) meets all current zoning standards Yes _____

For Land Division, a non-refundable fee of \$ 75.00 for each newly assigned parcel number has been paid by the applicant and a receipt for such payment has been issued.

Yes _____ Date paid: _____

After reviewing, it is the determination of the Charter Township of Grayling, under the authority granted by the various statutes of the State of Michigan, and ordinances which currently exist concerning the regulation of land divisions or lot splits that the requested division/splits described in this application have been:

Approved _____ Denied _____

Reason for denial

Special instructions to property owner

Signature of reviewing official _____

Title of reviewing official _____ Date _____

Copy mailed/mailed to property owner _____ Copy inserted in property file _____

COUNTY OF CRAWFORD

200 West Michigan Ave.
Grayling, MI 49738
989-344-3231 or 989-344-3204
Fax: 989-344-3223

Kate M. Wagner, County Treasurer
Heather Malone, Chief Deputy County Treasurer

Land Division Tax Payment Certification Form

Name: _____ Phone: _____

Owner Address: _____

Owner City, State, Zip: _____

Property Address: _____

Property City, State, Zip: _____

Parcel ID Number: _____

Attach a description of the parcel to be divided

[] CERTIFICATION DENIED

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

Delinquent Taxes Owed: _____

[] CERTIFICATION APPROVED

Pursuant to House Bill 4055, the Crawford County Treasurer's Office certifies that all property taxes and special assessments due on the above parcel subject to the proposed division for the five years preceding the date of the application have been paid. This certification does not include taxes, if any, now in the process of collection by the City, Village or Township Treasurer.

Certified by: _____ Date Certified: _____