Montmorency Township P.O. Box 457 Hillman, MI 49746

Parcel Number

Number of splits allowed by Statute:
Number of splits requested:
Control Number

Land Division Application

You MUST answer all questions and include all attachments, or this will be returned to you. Bring or mail to:

Insert here, mailing address for the municipal reviewing agent.

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 sent, when the review is completed.

Name: Date:					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). MCL 560.101 ct. seq.)	
	1. LO Addre ! Paren	1. LOCATION of parent parcel to be split: Address:, Road Name: Parent parcel number: Legal description of Parent Parcel (attach extra sheets if needed):				
	Towns	ship, City or	Village Name:			
Number	Name:	State:		Dhomas	ne: ()	
	City.			2.1		
Control	3. APPLICANT information (if not the property owner): Contact Person's Name: Business Name:					
9	Dustress Hame.			Dhonai		
. •	Addre	58:	Road Name:			
	City: _		State:		Zip Code	
4.						
	A.	Number of	new Parcels			
	B. C.	THEOTHERS OF	interior de (residential, commercial etc.)			
	C. The division of the parcel provides access to an existing public road by: (check one) Each new division has frontage on an existing public road.					
			A new public road prov	rontage on an existing p	public road.	
			A new private road or a	(Re	oad name can not duplicate an existing road name.) name:	
4A.	Write here	or attach,	A recorded easement (d	(Reriveway). (Can not service no posed new road, easeme	old name can not duplicate an existing mad name.)	
4B.			legal description for each pr		h extra sheets if needed):	
5 A. 5 B .	The nu Identify (See se	imber of futu y the other p	of the Statute. Make sure y	from the parent parcel	to another parcel?statements as required in section 109(3)	
	uma 102	(4) or the 3	tatute.			

6. DEVELOPMENT SITE LIMITS Check each that represents a condition which exists on the parent parcel. Any part of the parcel:
or are parcer.
is in a DNR-designated critical sand dune area.
is riparian or littoral (it is a river or lake front parcel). is affected by a Great Lake High Risk Erosion setback.
includes a wetland.
includes a wettand.
is within a flood plain.
includes slopes more than twenty five percent (a 1:4 pitch or 14° angle) or steeper.
is on muck soils or soils 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. AT [ACHMEN IN (all attachments must be included). Letter each attachment as shown here.
A. 1. A survey, sealed by a professional surveyor at a scale of (insert scale), of
proposed division(s) of parent parcel;
OR 2. A map/drawing drawn to scale of (insert scale), of proposed division(s) of parent
parcel and the 30 day 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 (indicate when made or none), 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, etc.)
(8) any of the features checked in question number 6.
B. A soil evaluation or septic system permit for each proposed purcel prepared by the Health
Department, or each proposed parcel is serviced by a public sewer 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, or respective city/village
street administrator, for each proposed new road, easement or shared driveway.
E. A copy of any transferred division rights (\$109(4) of the Act) in the parent parcel.
F. A fee of \$
G. Survey must include the new and remaining parcels legal descriptions, if applicable.
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
compty 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 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), 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: TOTAL 5 , Receipt #
Approved. Conditions if any
Approved: Conditions, if any:
Denied: Reasons (cite §):
Signature and date:
O'BHILLIAN GHA GUICE