

SPENCER TOWNSHIP LAND DIVISION/LOT LINE ADJUSTMENT APPLICATION

Send application and payment (\$250) to: Andrea Roberts, Assessor Spencer Township 14960 Meddler Rd, Gowen, MI 49326

Please be advised that all land divisions must be and are reviewed by the County and will be processed in the order they are received. The typical turn-around time is roughly one to two months; however, this may be extended due to conditions outside of our control. You will be notified by mail when your land division is complete by both the County and the Assessor. Approval by your local municipality is required before property may be sold. By signing this document, you are acknowledging that you understand this statement.

1. LOCATION OF PARENT PARCEL TO BE SPLIT:

Parent Parcel Property ID Number: _____

Street Number: _____ Road Name: _____

2. PROPERTY OWNER INFORMATION:

Name: _____

Mailing Address: _____

City: _____ State: **MI** Zip Code: _____

Phone Number: _____

3. APPLICANT INFORMATION (if different than property owner):

Contact Person Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: (_____) _____

4. LAND DIVISION PROPOSAL: (Describe each division(s) being proposed)

A. Number of new parcels: _____

B. Intended Use (residential, commercial, etc.): _____

5. DEVELOPMENT SITE LIMITS: (check each of the following that represents a condition existing on any part of the parcel)

_____ is riparian or littoral (river or lake front property) _____ includes a wetland _____ is within a flood plain

_____ includes slopes more than twenty five percent (1.4 pitch or steeper)

_____ is known or suspected to have an abandoned well, underground storage tank or contaminated soils.

6. A SURVEY, sealed by a professional surveyor of proposed division(s) of parent parcel. SURVEY MUST SHOW:

1. CURRENT BOUNDRIES

2. ALL PREVIOUS DIVISIONS MADE AFTER MARCH 31, 1997

3. PROPOSED DIVISION(S) WITH ACCURATE DIMENSIONS SHOWN

4. EXISTING AND PROPOSED ROAD/EASEMENT/RIGHT-OF-WAY

5. EASEMENTS FOR PUBLIC UTILITIES FROM EACH PARCEL TO EXISTING PUBLIC UTILITY

6. ANY EXISTING IMPROVEMENTS (buildings, wells, septic systems, driveways, etc.) AND ANY OF THE FEATURES CHECKED IN QUESTION NUMBER 5 ABOVE.

B. ZONING APPROVAL (\$50): SIGNED ZONING APPROVAL (ATTACHED) BY SPENCER TOWNSHIP ZONING DEPARTMENT (616) 984-0035. NO LAND DIVISION APPLICATION SHALL BE APPROVED WITHOUT A SIGNED ZONING CLEARANCE PERMIT.

C. PROPERTY TAX CERTIFICATE (\$5): SIGNED BY KENT COUNTY TREASURER (ATTACHED) NO LAND DIVISION APPLICATION SHALL BE APPROVED WITHOUT A SIGNED PROPERTY TAX CERTIFICATE. FOR YOUR PROPERTY TAX CERTIFICATE PLEASE CONTACT THE KENT COUNTY TREASURER AT 300 MONROE AVE NW, GRAND RAPIDS, MI, 49503 OR CALL (616) 632-7500

7. AFFIDAVIT AND PERMISSION FOR MUNICIPAL, COUNTY AND STATE OFFICIALS TO ENTER THE PROPERTY FOR INSPECTIONS:

I, hereby certify that the information contained on this application is true, and understand that any application and subsequent approval based on false information will be void. Further, I agree to comply with the conditions and regulations provided with this parcel division under applicable State and Local regulations. Deed or other conveyance will include statements required by Public Act 591 of 1996 as to whether the right to make further divisions is proposed to be conveyed and the required statement regarding the Michigan Right to Farm Act. Further, I agree to give permission for officials of the local 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 this application is correct.

PROPERTY OWNER(S) SIGNATURE: _____
DATE: _____

DO NOT WRITE BELOW THIS LINE - OFFICIAL USE ONLY

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REVIEWER'S ACTION: _____ **DATE RECEIVED BY OFFICE:** _____

LAND DIVISION FEE & ZONING PERMIT TOTAL \$250 COLLECTED (CASH OR CHECK): _____

PACKET SENT TO KENT COUNTY PD&M: _____

FINAL APPROVAL LETTER SENT TO APPLICANT: _____

ANDREA ROBERTS, SPENCER TOWNSHIP ASSESSOR

DATE: _____



Spencer Township

14960 Meddler Road • Gowen, MI 49326
Phone (616) 984-0035 • Fax (616) 984-2207

Property Split Application

Property Owner: _____

Contact Information:

Address: _____

Phone: _____

Parcel to be Split:

Parcel Number: _____

Address: _____

Number of Splits: _____

Please provide us with a drawing showing the size and dimensions of each new property created.

There is a \$50.00 charge per split

Any questions feel free to call the office.

Property Owner's Signature

Date

Staff's Signature of Approval

Date



PETER F. MACGREGOR
Kent County Treasurer
300 Monroe Avenue NW
Grand Rapids, MI 49503
Phone (616) 632-7500 Fax (616) 632-7505

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(s) to be split, combined, adjusted or changed.
This form must also be accompanied by a receipt or check for the \$5.00 per parcel certification fee.

CERTIFICATION DENIED

The Kent 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

CERTIFICATION FEE COLLECTED

Pursuant to House Bill 4055, the Kent County Treasurer's Office certifies that all property taxes and special assessments due to 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: _____