



Charter Township of Garfield

Grand Traverse County

3848 VETERANS DRIVE
TRAVERSE CITY, MICHIGAN 49684
PH: (231) 941-1620 • FAX: (231) 941-1588

PARCEL DIVISION APPLICATION

(NO. AS OF 3-31-1997)

Property Owner

Owner: _____
Address: _____
City, State, Zip Code _____
Phone Numbers _____
Email Address _____

Applicant Information

Applicant: _____
Address: _____
City, State, Zip Code _____
Phone Numbers _____
Email Address _____

1) Parcel Information:

- a) Location of parent parcel to be split (Address/Road Name): _____
- b) Parent parcel legal description (Please Attach): _____
- c) Parent parcel acreage: _____
- d) Has the parent parcel previously been divided? _____
- e) Parent Parcel Identification Number: 28-05 _____ - _____ - _____

2) Proposed Division to include the following:

- a) Number of new parcels proposed: _____
- b) New parcel legal description(s) (Please Attach): _____
- c) Acreage of new parcels: _____
- d) Post parent parcel acreage (after division): _____
- e) Intended use (residential, commercial, etc.): _____
- f) Depth to width ratio: _____

3) Describe the Intended Access to the New Parcels:

- ___ Each new division has frontage on an existing public road (please provide road name):
- ___ A new public road, proposed road name:
- ___ A new private road, proposed road name:

Please attach a legal description of any proposed new road, easement or shared driveway.

PARENT PARCEL CODE # : 28-05-
STREET # _____
STREET NAME _____

4) Future Division Allocation

- a) Are any future divisions being allocated to a newly created parcel?
- b) What parcels will be allocated future divisions, if any?
- c) How many allocations are being made?

(See section 109 (2) of the Statute to ensure your deed includes both statements required in 109 (3 & 4) of the Statute.)

5) Development Site Limits (Please indicate if any of the limitations below exist on the parcel)

- Waterfront property (river, lake, pond etc.)
- Wetlands
- Is within a flood plain Includes a beach
- Is on muck soils or soils known to have severe limitations for on site sewage system

6) Attachments (Please include the following attachments and label each attachment appropriately)

- a) A survey of the parent parcel drawn to scale as of March 31,1997, which includes the following:
 - i) All previous divisions made after March 31, 1997
 - ii) The proposed new parcel(s) with dimensions of the parcel(s)
 - iii) Existing and proposed road/easement right-of-way(s)
 - iv) Legal description of proposed new road, easement or shared driveway
 - v) Utility easements to new parcel from existing utilities
 - vi) Any existing improvements (buildings, wells, septic system, driveways, etc.)
 - vii) Any features checked in #5 above
- b) Grand Traverse County Road Commission OR MDOT approval for driveways, roads, easements etc
- c) Land Division Tax Payment Certification by Grand Traverse County Treasurer that indicates all property taxes and special assessments, for the five (5)years preceding the application date, have been paid in full.

7) Acknowledgment

The undersigned acknowledges that any approval of this application is not a determination that the resulting parcels comply with other applicable ordinances, rules or regulations which may control the use or development of the parcels. It is also understood that ordinances, laws and regulations are subject to change and that any approved parcel division is subject to such changes that may occur before the recording of the division or the development of the parcels. The undersigned agrees that the statements made in this application are true and correct and acknowledges that, if found not to be true, this application and any approval will be void.

Owner signature

Date

Owner's Name Printed

Applicants signature

Date

Applicants Name Printed

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Office Use Only – Please do not write below this line

_____ Approved: (With conditions below, if any)

_____ Denied: (Please include reasons for denial)
