



OFFICE OF COMMUNITY DEVELOPMENT

8140 Main Street • Dexter, Michigan 48130-1092 • (734) 426-8303 • Fax (734) 426-5614

APPLICATION LAND DIVISION, COMBINATION OR BOUNDARY ADJUSTMENT

OFFICE USE: Fee: \$350.00 Date Received: Receipt #: Current Taxes Paid: YES NO

Application for: Land Division Combination Boundary Adjustment

Platted and Metes & Bounds Lots

- 1. For Platted Lots: The lot(s) to be divided/combined or the boundary adjusted is/are part of a recorded plat located in Section having an address of and is/are known as Lot(s) of Subdivision.
2. For Metes & Bounds Lots: The property/properties to be divided and/or combined or is/are the subject of the boundary adjustment is/are not part of a recorded plat, and is/are located in: Section Township Range

For all Lots

- 3. Provide the Parcel Identification Number and Square Footage: Parcel Identification Number: Original Acreage: Parcel Identification Number: Original Acreage:
4. Number of new parcel(s) to be created by land division/combination into
5. Will a transfer(s) of ownership occur as the result of this division? If yes, complete and attach Michigan State Tax Commission Form(s) L-4260.
6. Will the parent parcel(s) have any unallocated division under the Land Division Act? If yes, complete and attach Michigan State Tax Commission Form(s) L-4260a.

Property Owner Information:

THIS APPLICATION MUST BE SIGNED BY ALL PERSONS WHO HAVE ANY LEGAL OR EQUITABLE INTEREST IN THE PARCEL(S) PROPOSED FOR DIVISION/COMBINATION/ADJUSTMENT. ATTACH ADDITIONAL OWNERSHIP INFORMATION AND SIGNATURES, AS NECESSARY.

First Name Last Name Phone Number (m)

Address City State Zip

Email Address

Signature:

Applicant Information (if different from Owner):

First Name Last Name Phone Number (m)

Address City State Zip

Email Address

Signature:

**ALL APPLICATIONS MUST INCLUDE THE FOLLOWING INFORMATION
(APPEALS TO CITY COUNCIL SHALL ALSO INCLUDE THIS INFORMATION)**

- A.** Two signed and sealed surveys prepared by a professional land surveyor registered in the state of Michigan. The survey shall be prepared according to the guidelines specified in Section 3 of Michigan Public Act 132 of 1970, as amended, showing the parcels that would result from the requested division/combination of land, provided that the parcels are drawn as large as possible within the 8 ½ by 14 inch format required by Act 132 and shall provide all of the following information:
 - 1) Dimensions of all existing and proposed parcels.
 - 2) All existing structures on and within fifty (50) feet of the proposed parcels.
 - 3) Location of all existing and proposed public and private easements and rights-of-way.
 - 4) Location of existing public water and public sanitary sewer utilities and leads.
 - 5) Existing zoning and the location of front, side and rear yard setbacks on each proposed parcel, in accordance with Article 20, Schedule of Regulations in the City of Dexter Zoning Ordinance.
 - 6) All bodies of water and floodplains within fifty (50) feet of the parcel(s) to be divided/combined/adjusted.
 - 7) The means of access from each resulting parcel to an existing public road or street.
- B.** A legal description of existing and proposed parcels of land involved in the proposed land division/combination/boundary adjustment. The legal description shall be in a form sufficient for recording with the Washtenaw County Register of Deeds.
- C.** Copies of existing or proposed deed restrictions related to the proposed parcels.
- D.** Sufficient information about previous land division/combination/boundary adjustment activity to demonstrate that the parcel is eligible to be divided in the manner being proposed.
- E.** If a transfer of division rights is proposed in the land transfer, then information about the terms and availability of the proposed division rights transfer shall be submitted. Such information shall be in a form that satisfies the written notice requires specific in Section 109(2) of Michigan Public Act 288 of 1967, as amended.
- F.** Proof of fee ownership of the land proposed to be divided or combined, and insurance commitment for all of the parent parcels shall be submitted.

REVIEWED BY:

DATE	DEPARTMENT	APPROVED OR DENIED	SIGNATURE
	Community Development		
	Assessing		

REASONS FOR DENIAL (IF APPLICABLE): _____

DATE	DEPARTMENT	ATTACHMENT YES/NO	SIGNATURE
	Assessing		
	Attorney		
	City Manager		
	Community Development		
	Engineering		
	Public Service		

CITY COUNCIL ACTION: DENIED _____ APPROVED _____

I hereby certify that the foregoing has been adopted by the City Council of the City of Dexter at a regular meeting held on this _____ day of _____, 20____.

Justin Breyer, Dexter City Clerk