

This form is designed to comply with applicable local zoning, land division ordinances and Section 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 et seq.). Land in the township shall not be divided without the prior review and approval of the Administrator, or other official designated by the Township Board, in accordance with the Liberty Township Land Division Ordinance and State Land Division Act.

**Liberty Township**  
**Land Division Application**

**Application number:** \_\_\_ - \_\_\_

**Bring or mail this application with all required attachments to:**

**Liberty Township Assessor**  
**101 West Liberty Road**  
**Clarklake, MI 49234**  
**Office (Mondays only): (517) 529-4374 Cell: (517) 812-5648**  
**Fax: (517) 529-9066**

**APPLICANT Information (if not the owner, attach signed written consent to the application):**

Applicant Name: \_\_\_\_\_

Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PARENT Parcel Identification Number(s) as Identified on the most recent assessment roll:**

**38- -18- - - -**,

**38- -18- - - -**,

**38- -18- - - -**,

**38- -18- - - -**,

**38- -18- - - -**

Attach copy of most recent tax notice(s) for parcel or tract to be split and copy of all deeds since March 31, 1997 (that being the effective date of the Michigan Land Division Act) establishing current ownership and availability of division rights. Include a parcel map of the property as it existed on March 31, 1997, and any boundary lines and dimensions of each resulting parcel from any prior divisions since that date.

**PROPOSAL:**

1. ***Attach a tentative parcel map (survey preferred), including:***
  - a. Proposed boundary lines and the dimensions of each resulting parcel for this application.
  - b. Accurate legal description for each resulting parcel proposed.
  - c. The location, dimensions and nature of proposed ingress to and egress from any existing public or private road. **Note: For unnamed private roads, application will be required to the Jackson County Road Commission for approval of a new unique road name.**
  - d. The location of any public or private street, driveway (and associated existing addresses) or utility easement(s) to be located within any resulting parcel(s).
  - e. The location(s) of any existing structures or improvements (i.e. septic, well, house, garage, etc) and setback from proposed parcel lines.
  
2. ***DEVELOPMENT SITE LIMITS.*** Check each item below that represents a condition that exists on the parent parcel. Indicate location on proposed parcel map.
  - \_\_\_\_\_ A. In a DNR-designated critical sand dune area?
  - \_\_\_\_\_ B. Riparian or littoral (river or lake front parcel)?
  - \_\_\_\_\_ C. Affected by a Great Lake High Erosion setback?
  - \_\_\_\_\_ D. A wetland?
  - \_\_\_\_\_ E. A beach?
  - \_\_\_\_\_ F. Within a flood plain?
  - \_\_\_\_\_ G. Slopes more than twenty five percent (a 1:4 pitch or 14 degree angle) or steeper?
  - \_\_\_\_\_ H. On muck soils or soils known to have severe limitation for on site sewage systems.
  - \_\_\_\_\_ I. Known or suspected to have an abandoned well, underground storage tank or contaminated soils?
  
3. ***FUTURE DIVISIONS:***
  - a. How many divisions are remaining after processing of this application?  
\_\_\_\_\_
  - b. Are any future divisions being transferred from the parent parcel to another parcel? **Circle yes or no.** (If yes, please attach completed form L-4260a "Notice to assessor of transfer of the right to make a division of land" for each child parcel to receive division rights.)

**4. APPLICATION FEE: (Fee Calculation: \$50.00 for up to four resulting parcels, including remainder of parent, plus \$25 for each additional division requested). Amount Enclosed: \$\_\_\_\_\_**

**5. Affidavit and permission for municipal, county and state officials to enter the property for inspections:**

I agree the statements above are true, and if found not to be true this application and any approval will be void. Further, I agree to comply 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 division 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:** \_\_\_\_\_

**All complete application packages will be acted upon within 45 days of receipt. If the application package does not conform to the Liberty Township Land Division Ordinance requirements and the State Land Division Act, the administrator shall return the same to the applicant for completion and refilling in accordance with the ordinance and State Land Division Act.**

**For Government Use - DO NOT WRITE BELOW THIS LINE**

**Amount Paid:** \_\_\_\_\_ **Receipt/check #:** \_\_\_\_\_

**Date Received:** \_\_\_\_\_

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**ZONING ADMINISTRATOR COMMENTS:**

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**ASSESSOR'S COMMENTS:**

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\_\_\_\_ Approved: Conditions, if any:

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\_\_\_\_ Denied: Reasons:

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Assessor/Land Division Administrator Signature and Date:

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*Any person or entity aggrieved by the decision of the assessor or designee may, within 30 days of said decision appeal the decision to the Township Board which shall consider and resolve such appeal by a majority vote of said Board at its regular meeting or session affording sufficient time for a 10 day written notice to the applicant of the time and date of said meeting. The Township Board may affirm, modify or reverse the decision of the Administrator and its decision shall be final.*

*A land division approval is effective for 90 days from its issuance, after which it shall be revoked unless within such period there is recorded with the County Register of Deeds office and filed with the Administrator a conveyance of the approved land division or survey evidencing the same.*