Land Division Application

Date Fee Paid ____________________________ Permit #_________________________
Check # ____________________________ STATUS: Approved ______ Denied ______
Cash ____________________________ DATE: ____________________________
Received By: ____________________________

Application fee $250.00 plus $100.00 each additional parcel split

Applicant ____________________________ Phone #__________________________
Owner ____________________________ Phone #__________________________
Address ____________________________ Date__________________________
City ____________________________ State ______ Zip__________________________

The following application is required to be completed and any items, such as deeds and surveys are to be included with the application when returned to the Township Office for determination.

1) Is this request for a land division for a build-able parcel?
   - Provide a map showing the original parent parcel as it existed on March 31, 1997. (List as Exhibit A)
   - Parent parcel or parent tract as of March 31, 1997 #002-

2) Have there been any divisions from the parent parcel since March 31, 1997?
   - How many divisions?
   - If this parcel is a previous land division since 03/31/1997, what is its parcel number?
     - #002-
   - If this parcel is a previous land division please provide a copy of the deed creating this parcel which provides for any future land divisions. (List as Exhibit B)

3) Number of land divisions requested? (Include remaining parcel in total) ____________________________
   - Provide a certified survey and legal description for each parcel proposed.
   - Show all easements public and private including natural gas, electric, cable, and road easements (List as Exhibit C).

4) Does this parcel have frontage on a public road?
   - Provide a written legal recorded easement if the parcel does not have frontage on a State or County road.
   - Provide written documentation of access approval and or a driveway curbed access approval from the local or State Road Commission or Department (List as Exhibit D).

"The Township of Burt, Alger County is an Equal Opportunity Employer"
Arrangements for Americans with Disabilities can be made by calling the Township Office at the above number.
5) The proposed new parcel contains how many acres?
   • If more than one parcel division is proposed please provide a list of all parcels including the lot width and lot area of each and describe the total number of divisions on a separate sheet (List as Exhibit E).

6) Does each parcel have a lot width to depth ratio of less than 4 to 1?  
   If no, please explain:

7) Is any resulting parcel less than one acre?
   For parcels less than one acre in area, written verification of a well and septic approval is required from the local County Health Department (List as Exhibit F).

8) Please include a letter of verification (List as Exhibit H). Verification is required in writing that the proposed land division(s) complies with the Burt Township Zoning Ordinance. The letter should be specific that all resulting lots meet all the requirements.

ACKNOWLEDGEMENT

Approval of a land division is required before any division is created, sold, transferred. Approval of a land division is not a determination that the resulting parcels comply with other ordinance or regulations of Burt Township, Alger County or the State of MI.

Burt Township, its officers, employees and agents are not liable if a zoning permit or building permit are not issued for the reasons set forth in Sec 109a of the Land Division Act. Applicants are encouraged to check local zoning and local Health codes:

I, (we) agree that the above answers and information submitted are true and accurate and if found to be not true that any approval will be void.

__________________________________________
Applicant/Owner

Date

TOWNSHIP OFFICE USE

Approved  Denied  Permit #

NOTES COMMENTS:

__________________________________________

If Denied, give reason:

__________________________________________

Designated Land Division Officer: ___________________________  Date: ___________________________

Form: LDA rev 7/22/09