



GRAND RAPIDS CHARTER TOWNSHIP

1836 E. BELTLINE NE - GRAND RAPIDS, MI 49525 - (616) 361-7391 - FAX (616) 361-0137

LAND DIVISION APPLICATION

This application must be complete. All questions must be answered and all attachments must be included with this application or the parcel split being applied for will be **delayed** or **denied**. Incomplete applications will be returned to the applicant.

Note: A separate application must be filed for each parcel to be split.

Return this application to: Assessors Department
Grand Rapids Charter Township Offices
1836 East Beltline Avenue NE
Grand Rapids MI 49525
(616) 361-7391

Section 1. Location of Parcel to be split:

Address: _____

Parcel # 41-14-____-____-____

Legal Description of Parcel to be split: (attach extra sheet if needed)

Section 2. Property owner/applicant information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone # () _____ Cell # () _____

Section 3. Proposal:

Number of Parcels created by this split: _____

Intended use Residential _____ Commercial _____ Other (describe) _____

The parcels created by this division will have access to an existing public road by: (check one)

_____ Each parcel will have access to an existing public road.

_____ Each parcel will have access to a new approved public road.

_____ Each parcel will have access to a new approved private road which will connect to an existing public road and meet the standards for the private roads as described in the Grand Rapids Township Private Road Ordinance.

Note: Include legal description and copy of sealed survey for proposed new approved public or private roads with this application.

Section 4. Development Site Limits:

(Check each condition, if any, that may apply to the parcel being split.)

The parcel: _____ is located within 500 ft of a lake, stream, drain, or wetland.

_____ Is located in part or wholly within a floodplain.

Section 5. Attachments: (all attachments must be included with this application.)

_____ A **survey**, sealed by a professional surveyor, of the proposed parcel division(s).

OR _____ An **accurate map** drawn to scale of the proposed parcel division(s).

The survey or map must show:

1. The proposed division(s).
2. Dimensions of the proposed division(s).
3. Existing and proposed road easement rights-of-way.
4. Easements for proposed public utilities to each parcel.
5. Any and all existing improvements (buildings, driveways, etc.)
6. Any lakes, streams, ponds, wetlands, etc.
7. Any previous divisions made since March 31, 1997.

_____ **Proof of ownership** of the parcel to be split (if applicant is not the current owner of record per Township Tax Records).

_____ **Legal descriptions** for each parcel resulting from this land division.

_____ A fee of **\$50.00** for each **new** parcel number resulting from this land division.

Section 6. Affidavit:

I, the applicant, declare the above statements to be true, and if any statement is found to be not true, I understand this application and any approval will be void. Further, I agree to comply with the conditions and regulations governing land divisions in the State of Michigan and Grand Rapids Township. Further, I agree to give permission for officials of the Township, Kent County, and the State of Michigan to enter the property where this land division is proposed for purposes of inspection to verify that the information contained in this application is correct. Further, I understand that this is only a land division and that approval of this division does not imply that the resulting parcels comply in any way with local building codes, zoning restrictions, or recorded plat restrictions or covenants, Finally, I understand that state acts and local regulations can change and if changed before an approved division(s) is recorded with the Kent County Register of Deeds Office, then the division(s) applied for must comply with the new requirements.

Applicant's Signature _____ **Date** _____

-----For Office Use Only-----

Section 7. Reviewer's action:

Total Fee \$ _____ Check # _____

Application Date: _____ (date stamp here)

Approved: _____ Date: _____

Denied: _____ Date: _____

Reason for denial: _____
(attach sheet if needed)