City of Traverse City

Office of the City Clerk

GOVERNMENTAL CENTER 400 Boardman Avenue Traverse City, MI 49684 (231) 922-4480 tcclerk@traversecitymi.gov



Dear Applicant:

Subject: Application for a Land Division/Boundary Adjustment

Enclosed is an Application for a Land Division/Boundary Adjustment which must be completed in its entirety prior to submission. "Boundary adjustment" means a property transfer between two or more adjacent parcels in the same plat that results in no new buildable lots or creates fewer buildable lots than originally platted. "Land Division" involves new buildable lots. Please familiarize yourself and adhere to the Traverse City Code of Ordinances Chapter 1244 Section 1244.05 *Land Division* which can be viewed in its entirety at:

https://library.municode.com/mi/traverse_city/codes/code_of_ordinances?nodeId=PTTWELVEP LCO_TITFOURSURE_CH1244SUPR_1244.05LADI.

When submitting your application, please include the following:

- 1). \$200 Application Fee
- 2). Proof of ownership i.e. deed, land contract, option to purchase agreement
- 3). Legal Description of parent parcel(s) and proposed parcel(s)
- 4). Current land survey prepared by a registered professional land surveyor
- 5). Notarization of each property owner's signature

Please note that even though your application may be accepted, a land division does not occur until receipt of a registerable conveyance is supplied to the City of Traverse City from the Grand Traverse County Register of Deeds.

Once your application and required documents have been received, the City Clerk's Office will obtain approvals from the appropriate departments and agencies. Once all departments have approved your request, the City Clerk's Office will forward your application to the Grand Traverse County Register of Deeds for review and final registration.

We hope this information is helpful! The City of Traverse City looks forward to working with you to compliment the living experience in Traverse City! Should you have any questions, please feel free to contact anyone in the City Clerk's Office at (231) 922-4480 or contact Alanna Crouch, Administrative Specialist at acrouch@traversecitymi.gov.

Most Sincerely,

Benjamin Marentette, CMC

City Clerk



City of Traverse City APPLICATION FOR LAND DIVISION AND/OR BOUNDARY ADJUSTMENT (City Ordinance 1244.05)

Applicant's Name:	
Address:	
Phone#:	
Representative Name:	Phone #:
Please indicate if:Land Division	Boundary Adjustment
Proof of Ownership*: Deed Land Contract_ If an unplatted tract or parcel; # of Division Rights * Please do not include documents with personal Birth Dates, Driver's License Numbers, Bank Acc	s: information such as Social Security Numbers,
Current Status - for subject "Parent Property or I	Properties"
Current Owner:	
Owner Phone #:	
Property Tax Identification #:	
Additional Property Tax Identification #:	
Property Address:	
Additional Property Address:	
Legal Description Requirement - Please attach	the following:
Legal Description of parent parcel(s) Legal Description of proposed parcel(s)	

The owner(s) of the above real property, in accordance with Traverse City Code of Ordinances Section 1244.05, requests that the attached legal descriptions be placed upon the City assessment and tax rolls.

Land Survey Requirement

A current land survey prepared by a registered professional land surveyor, containing the following information $\underline{\text{must}}$ be submitted with the application – $\underline{\text{up to } 11x17 \text{ hard } \text{copy, or } \text{digital}}$ PDF accepted. Please check-off any of the below items which are indicated on the survey.

1. Survey drawn to sca	ale, showing (attach & label accordingly)
a)	current boundaries of original parent parcel
b)	all previous divisions made from original parent parcel
c)	proposed division(s)
d)	dimensions of the proposed divisions
e)	existing and proposed road/easement rights-of-way
f)	existing and proposed public utilities which provide service to the parcel
g)	any existing improvements (buildings, wells, septic system, driveways, etc. including setback requirements
h)	legal description of all divisions and remainder of parent parcel
i)	wetlands
j)	flood plains
k)	underground storage tanks, contaminated soils
1)	existing topography and proposed preliminary drainage plans

2. Certification that boundary corner monuments have been or will be placed.

I agree the aforementioned statements made are true, and if found not to be true, this application and any approval shall be void. Further, I agree to comply with the conditions and regulations provided with this parcel division. In addition, I agree to give permission for the officials of the City of Traverse City, Grand Traverse County, and/or the State of Michigan to enter, during reasonable work hours, the property where this parcel is proposed for purposes of inspection. Finally, I understand this is only a parcel division which conveys certain rights under the applicable local land division ordinance and the State Land Division Act (formerly the subdivision control act P.A. 288 of 1967, as amended (particularly by PA. 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 restrictions or other property rights.

Lastly, even if this division is approved, a land division does not occur until receipt of a registerable conveyance is supplied to the City of Traverse City. I understand if zoning, local ordinances and State Acts change prior to land divisions being completed (registerable conveyances) the divisions must comply with the new requirements unless deeds, land contracts, leases or surveys representing the approved divisions are recorded with the Register of Deeds. I further understand that this approval is valid for six months from the date of issuance and if the proposed land division is not completed during the six month time frame, a new application and approval must be obtained.

The applicant acknowledges that the City may be required from time to time to release records in its possession. The applicant hereby gives permission to the City to release any records or materials received by the City from the applicant as it may be requested to do so as permitted by the Freedom of Information Act, MCL 15.231 et seq.

Please attach the appropriate \$200.00 per application fee

Last Updated: May 22, 2019

SIGNATURE OF OWNERS (All property owners' signatures must be notarized.) Property Owner's Signature: Date: _____ Property Owner's Printed Name: STATE OF MICHIGAN) ss COUNTY OF GRAND TRAVERSE The foregoing instrument was acknowledged before me this _____ day of _____, ____, by _____. Notary Public County of _______, State of Michigan My Commission Expires: Acting in the County of _____ Property Owner's Signature: _____ Date: _ Property Owner's Printed Name: STATE OF MICHIGAN) ss COUNTY OF GRAND TRAVERSE The foregoing instrument was acknowledged before me this _____ day of _____, ____, by _____. Notary Public County of ______, State of Michigan My Commission Expires:

City of Traverse City Office of the City Clerk 400 Boardman Avenue, Traverse City, MI 49684 231.922.4480 (Office), 231.922.4485 (Fax)

Acting in the County of

www.traversecitymi.gov tcclerk@traversecitymi.gov