

GARFIELD TOWNSHIP
9348 Terry St. PO Box 390, Lake, MI 48632
Office: 989-544-2445
Division / Combination Application

Metes and Bounds (Not in Subdivision)

Platted Lots of Record (Lots in Subdivision)

_____ Combination No Charge

_____ Combination No Charge

_____ Land Division \$75

_____ Land Division \$75

Parcel Information

Parcel #: 013-____-____-____

Parcel #: 013-____-____-____

Parcel #: 013-____-____-____

Parcel #: 013-____-____-____

ATTACHMENTS: Please provide the following with your application.

- Land Division Tax Certification signed by the Clare County Treasurer located at 225 W Main St, Harrison, MI.
- A survey, sealed by a professional surveyor, is required for all divisions/combinations/adjustments with the exception of combinations of platted lots of record in a subdivision. This survey must show:
 - o The proposed division(s) including legal descriptions for each new parcel
 - o Date, survey number, scale and north point
 - o Dimensions of the proposed divisions
 - o Existing and proposed easements, roads and/or rights-of-way
 - o Easements for public utilities from each existing and proposed parcel
 - o Any existing improvements (buildings, wells, septic systems, etc.)
- Completed Rescind for retiring parcel(s) and completed Principal Residence Exemption affidavit for new parcel(s) if applicable.

PROPERTY OWNER ACKNOWLEDGEMENT:

I agree that the statements made above are true to the best of my understanding. If found to not be true, this application and any approval will be void.

I agree that any outstanding special assessments applied to any of the parcels to be combined, will remain with the parcel after combination and that future special assessment adjustments may be applied.

By submitting this application, authority is given to Township representatives to physically view and inspect the property.

The undersigned says that (s)he is he Petitioner involved in this application, and that the foregoing answers and statements herein contained, and the information herewith submitted are, in all respects, true and correct to the best of his/her knowledge and belief.

*Note – The new “Child Parcels” created from a property split or combination are recognized and brought on to the tax roll in the year following the request.

Signature of property owner: _____ Date: _____

Phone Number: _____

For Office Use Only:

Date Received: _____ **Amount Received:** _____

Township Approval: YES / NO Date: _____ Signature: _____
 If no, reason for denial: _____

Assessor Approval: YES / NO Date: _____ Signature: _____
 If no, reason for denial: _____