



# APPLICATION FOR LAND DIVISION Section 21.36 of the Zoning Ordinance

**LD** \_\_\_\_\_ - \_\_\_\_\_  
**Fee: \$120**

Thornapple Township, 200 E. Main St., Middleville, MI 49333  
Phone: 269-795-7202 Fax: 269-795-8812  
Email: [zoning-administrator@thornapple-twp.org](mailto:zoning-administrator@thornapple-twp.org)

## PROPERTY INFORMATION (Parent Parcel)

Property Address: \_\_\_\_\_  
Parcel ID Number: \_\_\_\_\_ Zoning District \_\_\_\_\_ Wetlands Present? Y or N  
Parcel Size Frontage: \_\_\_\_\_ feet Depth: \_\_\_\_\_ feet Area: \_\_\_\_\_ [Acres or square feet]

## APPLICANT INFORMATION

### 1. Applicant

Identify the person or organization requesting the Land Division:

Name: \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Organization \_\_\_\_\_ Telephone \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ FAX \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail \_\_\_\_\_

### 2. Applicant Interest

The applicant must have a legal interest in the subject property, please check one below:

Property Owner     Purchase by Land Contract     Option to Purchase  
 Purchase Agreement

### 3. Property Owner      Check here if applicant is also property owner

Identify person or organization that owns the subject property:

Name: \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Organization \_\_\_\_\_ Telephone \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ FAX \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail \_\_\_\_\_

### 4. Authorized Agent

Identify person or entity representing the property owner or applicant in this petition:

Name: \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Organization \_\_\_\_\_ Telephone \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ FAX \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-Mail \_\_\_\_\_

*Land Division Application – Continued*

**REQUIRED APPLICATION ATTACHMENTS**

Each of the following documents must be filed with the Zoning Administrator before this application can be processed:

- o Completed application form
- o Application fee paid
- o Boundary survey and legal description of parent parcel
- o Boundary survey and legal description of each proposed land division
- o An approved site evaluation for each new parcel and the remainder of the parent parcel issued by the Barry Eaton District Health Department
- o Surveys must show existing easements of record or proposed easements
- o Other information listed here:
  - 1. \_\_\_\_\_
  - 2. \_\_\_\_\_
  - 3. \_\_\_\_\_

**REQUEST & AFFIDAVIT**

**The applicant must read the following statement carefully and sign below:**

*The undersigned requests Thornapple Township review this application and related required documents and site plans as provided in Article 21 of the Thornapple Township Zoning Ordinance. The applicant further affirms and acknowledges the following:*

- o *That the applicant has a legal interest in the property described in this application, and*
- o *The answers and statements contained in this application and attachment are in all respects true and correct to the best of my knowledge, and*
- o *That the approval of this application does not relieve the undersigned from compliance with all other provisions of the Zoning Ordinance or other codes or statutes and does not constitute granting of a variance, and*
- o *The applicant grants the Township staff and Planning Commission members the right to access the subject property for the sole purpose of evaluating the application.*

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

**THIS SECTION FOR TOWNSHIP USE ONLY**

Application received by (initials) \_\_\_\_\_ on (date) \_\_\_\_\_.

Application fee in the amount of \$ \_\_\_\_\_ paid on (date) \_\_\_\_\_ File # \_\_\_\_\_ - \_\_\_\_\_.

Treasurer confirmation of no delinquent taxes owed on property \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_  
*initials*

**Note: Approval by both the Assessor and the Zoning Administrator is required.**

- Approved by Assessor

Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

- Approved by Zoning Administrator

Signature: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

- Approval is denied by the:  Assessor  Zoning Administrator

For the following reasons: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_