



CITY OF
GRAND
RAPIDS

Land Division/Transfer/Combination Application

Approval of a land division, combination, or a parcel line boundary change (land transfer) is required before the newly described parcel, or portion thereof, is transferred to another party. Applicants must answer all questions and include all required documents and fees, or this application will be returned as incomplete. Please send completed applications and required documents to:

**Kent County Property Description & Mapping
County Administration Bldg, 3rd Floor
300 Monroe Ave NW
Grand Rapids MI 49503
Phone: (616) 632-7520
Fax: (616) 632-7545**

Approval requires compliance with the Land Division Act (public Act 591 of 1996 of the State of Michigan), and compliance with the City of Grand Rapids Land Division Ordinance (Chapter 64 of the City Code, Article 3, Sections 5.321-5.360).

Administrative Fees *(Made payable to the City of Grand Rapids)*

| <u># of Resulting Parcels</u> | <u>Fee</u> |
|-------------------------------|--------------|
| 1 | \$70.00 |
| 2 | \$70.00 |
| 3 | \$90.00 |
| 4 | \$110.00 |
| 5 | \$125.00 |
| Additional over 5 | \$15.00 each |

Additionally, reimbursement of all costs associated with the recording of documents to identify property not in compliance with the Land Division Act and/or City of Grand Rapids Ordinances.

SECTION 1: APPLICANT AND OWNER INFORMATION

Applicant Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

If applicant is not the owner, applicant must provide authorization form, signed by the owner, to act on owner's behalf.

Property Owner Information If Different From Above

Owner Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

SECTION 2: PARCEL OR TRACT INFORMATION

Please enter the parcel numbers and property addresses of all involved parcels. The first parcel you list will be considered "primary" for purposes of this application.

Total Number of Residential Units* Total Number of Commercial Units*

41- _____ , St # _____ St _____ Dir _____

41- _____ , St# _____ St _____ Dir _____

41- _____ , St# _____ St _____ Dir _____

41- _____ , St# _____ St _____ Dir _____

*"Residential Units" are houses, apartments, condos or other dwelling units
"Commercial Units" are separate business spaces (suites, units, etc.)

Attach additional sheets if more than 4 parcels are involved.

Important: Attach a list of the parent parcel owners if different than the Owner Name noted above.

SECTION 3: PROPOSAL

Please check one of the following that best describes your proposal.

_____ Parcel line boundary change.

_____ Combination of 2 or more parcels.

_____ Division of land.

_____ Other (please describe). _____

Please answer all of the following:

- A. Total number of resulting parcels including those to be retained by owner: _____
- B. Total number of resulting vacant parcels to be used for development sites: _____
- C. Total number of resulting vacant parcels to be used for passive purposes (i.e., non-buildable): _____
- D. Will any of the resulting parcels require the use of or be affected by a proposed or existing easement?
Yes _____ No _____ If yes, easements must be clearly drawn on survey.
- E. Will any of the proposed parcels be affected by existing or proposed deed restrictions that may render a proposed parcel "not buildable"? Circle one: Yes No
- F. Will any existing building be within 30 feet of a proposed lot line? Circle one: Yes No
- G. If you answered "Yes" to question F., what is the use of the building closest to the proposed lot line?
Circle one: 1-2 Family 3+ Family Commercial Industrial Institutional Mixed Use

SECTION 4: REQUIRED ATTACHMENTS

1. A sketch or survey, drawn to scale, for each existing parcel which must include the following:
 - _____ All lot line dimensions of each existing parcel.
 - _____ Legal description of each existing parcel.
2. A sketch or survey, drawn to scale, for each resulting parcel which must include the following:
 - _____ All lot line dimensions of each resulting parcel.
 - _____ Legal description of each resulting parcel.
 - _____ Location and legal description of existing and/or proposed easements and rights of way.
 - _____ Location of easements for public utilities.
 - _____ All existing improvements (buildings, pools, fences, etc.,) drawn to scale and all distances from the improvements to proposed parcel boundaries.
 - _____ The location of well and septic systems.
- 3.. If applicable, a copy of all existing or proposed deed restrictions which would render a proposed parcel "not buildable." **Note: The City may require that the applicant provide a title search from a title insurance company if it is reasonably necessary to show that previous land divisions or transfers do not preclude the proposed transfer(s) or that there are no deed restrictions which would render a proposed parcel "not buildable."**
4. For land divisions only, Michigan Department of Treasury Form L-4260A (Notice to Assessor of Transfer of the Right to Make a Division of Land) clearly identifying the number of division rights being transferred to each resulting parcel.
5. Proof of ownership if the current owner is different than the owner of record as listed by the City of Grand Rapids Assessor's Department.
6. A check to the City of Grand Rapids for application fees.

SECTION 5: AFFIDAVIT AND PERMISSIONS

Please read the following statement carefully before signing.

- I agree the statements made on this document are true, and if found not to be true, this application and any approvals will be void.
- I agree to give permission for officials of the municipality to enter onto property involved in this application for purposes of inspection, to verify that the information on the application is correct, at a time mutually agreed upon with the applicant.
- Further, I understand that any approval hereunder only constitutes approval of requested legal descriptions and does not provide, constitute, infer, or imply buildability or compliance with any applicable statute, law, building code, deed restriction, or property right.
- Further, I agree to comply with the conditions and regulations provided with this parent parcel or parent tract division.
- Further, I understand that the Land Division/Transfer/Combination application may take up to 45 days to be processed. Further, I understand that property tax bills may be issued using the parent parcel(s). I agree to have the tax bills and other City of Grand Rapids liens charged/billed during this period paid by the appropriate party.
- Finally, even if this division is approved, I understand local zoning ordinances and State Acts change from time to time, and if changed, the divisions made here must comply with the new requirements (i.e., apply for division approval again) per the City of Grand Rapids Land Division Ordinance.

SECTION 6: CERTIFICATION

The owner of the property must sign below. Agents may not sign on the behalf of the owner unless proof of power of attorney is provided. If multiple parcels are involved under separate ownership, the owners of all involved parcels must sign below.

Signature of Property Owner(s)

Printed Name of Property Owner(s)

Date Signed _____

OFFICE USE ONLY

Real Property Taxes

Are any real property taxes due and payable?

Yes No If yes, list parcels and amounts on reverse.

Special Assessments

Are any special assessments due and payable?

Yes No If yes, list parcels and amounts on reverse.

City of Grand Rapids Liens

Are there any City of Grand Rapids liens on the involved parcels?

Yes No If yes, list parcels and amounts on reverse.

Tax Capture Districts

Do all of the parent parcels lie within the same tax capture district?

Yes No NA If no, contact City of Grand Rapids Assessor's Office prior to processing application.

Date of this review: ___/___/___ Initials (reviewer) _____



Important Notice to Applicants

To assist with the processing of this application, it will benefit all parties if you check to see that unpaid real property taxes are paid. Please contact the Kent County Treasurer's Office at (616) 632-7500 and the City of Grand Rapids Treasurer's Office at (616) 456-3020.

You also should inquire with the City of Grand Rapids Treasurer's Office about unpaid special assessments and code enforcement liens. In addition, please inquire on unpaid water and sewer service bills by calling (616) 456-3200.

Section 5.350 of the Subdivision Regulations, being Chapter 64 of Title V of the City Code, requires that all due and payable property taxes and installments of special assessments and charges in lieu of special assessments pertaining to all involved parcels be paid in full.

The prompt resolution of these unpaid balances will expedite the processing of the application.

OFFICE OF
CITY
TREASURER



CITY OF GRAND RAPIDS

CITY OF GRAND RAPIDS LIEN SEARCH FOR DESCRIPTION CHANGE APPLICATION

Parcel #: _____ Date: _____
(Must be within 30
days of
Address: _____ application submittal)

| Water/Sewer Bill Amounts | Address |
|--------------------------|---------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Real Property Tax Amounts Owed at the City for tax year _____ : \$ _____

| <u>Misc. Receivables</u> | | <u>Special Assessments</u> | |
|--------------------------|---------------|----------------------------|---------------|
| <u>INVOICE #</u> | <u>AMOUNT</u> | <u>ROLL #</u> | <u>AMOUNT</u> |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

This summary does not include payments in transit or records not yet updated to the files as of the above date. Specific addresses and/or parcel numbers other than those provided must be requested on a separate Lien Search form.

Certified By: _____ Date: _____

Print or Type Name: _____

Title: _____

Comment: _____

300 MONROE AVE NW, RM 220, GRAND RAPIDS, MICHIGAN 49503-2296
PHONE: 616-456-3020 FAX: 616-456-3413



Peter F. Macgregor
Kent County Treasurer
300 Monroe Avenue NW
Grand Rapids, MI 49503
Phone (616) 632-7500 Fax (616) 632-7505

Land Division Tax Payment Certification Form

Name: _____ Phone: _____

Owner Address: _____

Owner City, State, Zip: _____

Property Address: _____

Property City, State, Zip: _____

Parcel ID Number: _____

Attach a description of the parcel(s) to be split, combined, adjusted or changed.
This form must also be accompanied by a receipt or check for the \$5.00 certification fee.

CERTIFICATION DENIED

The Kent County Treasurer's Office has found delinquent taxes on the parcel listed above and cannot issue a certification of tax payment.

Delinquent Taxes Owed: _____

CERTIFICATION APPROVED **CERTIFICATION FEE OF \$5.00 COLLECTED**

Pursuant to Public Act 23 of 2019, the Kent County Treasurer's Office certifies that all property taxes and special assessments due to the above parcel subject to the proposed division for the five years preceding the date of the application have been paid. This certification does not include taxes, if any, now in the process of collection by the City, Village or Township Treasurer.

Certified by: _____ Date Certified: _____