

For Zoning Administration Use Date Received______ Land Division Approved_____ Land Division Denied_____ Land Division Permit No._____

TOWNSHIP OF MUNISING LAND DIVISION APPLICATION

Please complete the application, include a check in the amount of \$100.00, payable to Munising Township, and mail to the following:

Township of Munising PO Box 190 Wetmore, MI 49895

Susan Bovan, Assessor (906) 387-1010 muntwpassessor@jamadots.com

Applicant		
Owner		
Address		
City		
State/Zip		
Phone Number(s)		

The following application is required to be completed and any items, such as deeds and scaled drawings are to be included with the application when returned to the Township Office.

- Is this request for a land division for a buildable parcel? _______
 Provide a map showing the original parcel as it existed on March 31, 1997. (Exhibit A)
 Parent parcel tract number: 02-006-________
- Number of land divisions requested.
 Provide a scaled map or survey and legal description for each parcel proposed. Show all easements public and private including natural gas, electric, cable and road on the scaled maps. (Exhibit C)

If more than one parcel division is proposed, please provide a list of all parcels including the lot width and lot area of each and describe the total number of divisions below: (Exhibit E)

- 5. The parcel to be retained contains how many acres?
- 6. Does each parcel have a lot width to depth ratio of less than 4 to 1? ______ If no, please explain: ______

ACKNOWLEDGEMENT

Approval of a land division is required before any division is created, sold, transferred. Approval of a land division is not a determination that the resulting parcels comply with other ordinance or regulations of Munising Township, Alger County or the Stat of Michigan.

Munising Township, its officers, employees and agents are not liable if a zoning permit or building permit is not issued for the reasons set forth in Sec. 109a of the Land Division Act. **Applicants are encouraged to check local zoning and local health codes.**

I, (we) agree that the above answers and information submitted are true and accurate and if found to be not true that my approval will be void.

Applicant/Owner Signature	Date	
TOWNSHIP OFFICE USE		
APPROVED / DENIED	Permit No	
Notes and Comments:		
If denied, reason for denial:		
1		
2.		
Designated Land Division Officer	Date	



County of Alger

LAND DIVISION TAX PAYMENT CERTIFICATION

NAME:_____PHONE:_____

OWNER'S ADDRESS:

PROPERTY ADDRESS:_____

CURRENT YEAR & 5 YEARS PRECEDING PARCEL ID #:

ATTACH A LEGAL DESCRIPTION OF THE PARCEL TO BE DIVIDED

[] CERTIFICATION DENIED

The Alger 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

Pursuant to House Bill 4055, the Alger County Treasurer's Office certifies that all property taxes and special assessments due on the above referenced parcel subject to the proposed division for five years preceding the date of the application have been paid. This certification does not include taxes or special assessments, if any, now in the process of collection by the Village/City or Township Treasurer.

Alger County Treasurer Date Certified

Certification Fee of \$5.00 collected: Check Cash Credit Card

PAM JOHNSON, TREASURER 101 COURT ST. MUNISING, MI 49862 (906) 387-4535 pjohnson@algercounty.gov