

# Bainbridge Township Berrien County, Michigan



7315 Territorial Road, Watervliet, MI 49098  
Phone: 269-468-8040/Fax: 269-468-3498  
www.bainbridgetownship.org

Andrew Gardiner, Supervisor  
Patty Hiler-Molter, Clerk  
Nancy Weber, Treasurer

## LAND DIVISION AND COMBINATION APPLICATION

**An application for a Land Division or Combination shall be submitted to the Zoning Administrator and Township Assessor, accompanied by a \$200.00 filing fee. Within 30 days after receipt of said application, the applicant shall be notified of the decision. Checks should be payable to "Bainbridge Township".**

Include the following:

1. Land Division/Combination Application
2. Copy of current paid tax bill, deed or other proof of ownership, which includes a legal description of the property, property tax number and proof of taxes, paid of said property.
3. Survey/Parcel Map
  - a. A survey map of the land proposed to be divided/combined, prepared pursuant to the survey map requirements of 1970 Public Act 132, as amended, (MCL 54.211) by a land surveyor licensed by the State of Michigan, and showing the dimensions and legal descriptions of the existing parcel and the parcels proposed to be created by the divisions(s)/combination(s), the location of all existing structures and other land improvements, and the accessibility of the parcels for vehicular traffic and utilities from existing public roads; OR
  - b. In lieu of such survey map, at the applicant's option, the applicant may waive the 30 day statutory requirement for a decision on the application until such survey map and legal description are filed with the Township, and submit a tentative preliminary parcel map drawn to scale of not less than one inch equaling 100 feet, including an accurate legal description of each proposed division/combination showing the boundary lines, dimensions, accessibility of each division from existing or proposed public roads for automobile traffic and public utilities and the location of all structures (buildings, mobile homes, walls, fences, billboards, poster panels and swimming pools), for preliminary review, approval, and/or denial prior to a final application.

## **LAND DIVISION AND COMBINATION APPLICATION cont.**

4. The history and specifications of any previous division of land of which the proposed division was a part sufficient to establish the parcel to be divided was lawfully in existence as of March 31, 1997.
5. If a transfer of division rights are proposed in the land transfer, detailed information about the terms and availability of the proposed division rights transfer.

Note 1: If the applicant submits an application for preliminary review (Item 3,b.above), the Zoning Administrator will forward a copy of the preliminary determination to the applicant. If approved, the applicant must submit a final application, with survey (Item 3, a above), to the Township Assessor for final approval.

*An approved land division/combination is effective for 45 days, after which it shall be considered revoked unless within such period a document is recorded with the County Register of Deeds office and filed with the Assessor.*

# BAINBRIDGE TOWNSHIP PARCEL DIVISION/COMBINATION APPLICATION

## WHEN COMPLETED RETURN FORM AND CHECK TO:

Bainbridge Township Hall  
Attn: Ross Rogien  
7315 Territorial Road  
Watervliet, MI 49098

YOU MUST answer all questions and include all attachments or this will be returned to you.

**Approval of a division of land is required before it is sold, when a new parcel is less than 40 acres and not just a property line adjustment.**

*This form is designed to comply with Sec. 108 and 109 of the Michigan Land Division Act formerly the Subdivision Control Act P.A. 288 of 1967 as amended, particularly by P.A. 591 of 1996 and P.A. 87 of 1997, MCL 560 et.seq.*

### 1. LOCATION OF PARENT PARCEL TO BE SPLIT/COMBINED:

PARENT PARCEL TAX CODE NUMBER: 11-01- \_\_\_\_\_

ZONING DISTRICT: \_\_\_\_\_

PARENT PARCEL LEGAL DESCRIPTION: (attach extra sheet if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 2. PROPERTY OWNER INFORMATION:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Address) (City) (State) (Zip Code)

Daytime Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

### 3. APPLICANT INFORMATION (if not property owner):

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Address) (City) (State) (Zip Code)

Daytime Phone: ( ) \_\_\_\_\_

### 4. PROPOSED DIVISION(S)/COMBINATION(S) TO INCLUDE THE FOLLOWING:

A. Number of new parcels: \_\_\_\_\_

B. Intended use (residential, commercial, etc.): \_\_\_\_\_

C. Each proposed parcel if 10 acres or less, has a depth to width ratio of 4 to 1 or \_\_\_\_\_ to \_\_\_\_\_  
as provided by ordinance.



- D. Each parcel has a width of \_\_\_\_\_ (not less than required by ordinance)
- E. Each parcel has an area of \_\_\_\_\_ (not less than required by ordinance)
- F. The division of each parcel provides access as follows: (check ONE)
- 1.) ☐ Each new division has frontage on an existing public road. Road name: \_\_\_\_\_
  - 2.) ☐ A new public road, proposed road name: \_\_\_\_\_
  - 3.) ☐ A new private road, proposed road name: \_\_\_\_\_
- G. Describe or attach a legal description of proposed new public or private road, easement or shared driveway (attach extra sheets if necessary):
- \_\_\_\_\_
- \_\_\_\_\_

H. Describe or attach a legal description for each proposed new parcel:

\_\_\_\_\_

\_\_\_\_\_

**5. FUTURE DIVISIONS** being transferred from the parent parcel to another parcel. Indicate number transferred:

(See section 109(2) of the Statute. Make sure your deed includes both statements as required in 109(3&4) of the Statute.)

**6. DEVELOPMENT SITE LIMITS** (*check any which represent a condition existing on the parent parcel*):

- |   |  |
|---|--|
| <input type="checkbox"/> Waterfront property (river, lake, pond, etc.)  | <input type="checkbox"/> Includes wetlands |
| <input type="checkbox"/> Is within a flood plain  | <input type="checkbox"/> Includes a beach  |
| <input type="checkbox"/> Is on muck soils or soils known to have severe limitations for on-site sewage systems. |  |

**7. ATTACHMENTS:** ALL the following attachments **MUST** be included. Letter each attachment as shown:

- A. A scale drawing that complies with the requirements of P.A. 132 of 1970 as amended for the proposed division(s)/combination(s) of the parent parcel showing:
- 1.) Current boundaries (as of March 31, 1997)
  - 2.) All previous divisions made after March 31, 1997 (indicate when made or none)
  - 3.) The proposed division(s)/combination(s)
  - 4.) Dimensions of the proposed divisions/combinations
  - 5.) Existing and proposed road/easement right-of-way(s)
  - 6.) Easements for public utilities from each parcel that is a development site to existing public utility facilities
  - 7.) Any existing improvements (buildings, wells, septic systems, driveways, etc.)
  - 8.) Any of the features checked in question #6. DEVELOPMENT SITE LIMITS
- B. Indication of approval, or permit from the Berrien County Road Commission or the Bainbridge Township Zoning Administrator, that proposed easement meets applicable standards and provides vehicular access to an existing road.
- C. A copy of any reserved division rights (sec. 109 (4) of the act) in the parent parcel
- D. A fee of \$200.00 Land Div. Application /\$200.00 Property Combination (attach check to application)

8. **IMPROVEMENTS:** describe any existing improvements (buildings, well, septic system, etc., which are on the parent parcel or indicate none) \_\_\_\_\_
9. **REVOCATION:** a decision approving a land division/combination is effective for 45 days after which it shall be considered revoked unless within such period a document is recorded with the County Register of Deeds office and filed with the Bainbridge Township Clerk or other designated official accomplishing the approved land division, combination or transfer.
10. **APPROVAL LIMITATIONS:** Approval of the land division/combination does not permit construction on the site. All Bainbridge Township ordinances regarding construction must be complied with. Further, all applicants must obtain permission from the Berrien County Road Commission for new driveways on the site.
11. **AFFIDAVIT and permission for municipal, county and state officials to enter the property for inspections:**

I agree that the statements made above are true, and if found not to be true, this application and any approval will be void. Further, I agree to comply with the conditions and regulations provided with this parent parcel division/combination. Further this parcel division/combination is proposed for purposes of inspection. Finally, I understand this is only a parcel division/combination which conveys only certain rights under the applicable local land division/combination ordinance and the State Land Division Act (formerly the subdivision control act P.A. 288 of 1967, as amended, particularly by P.A. 591 of 1996 and P.A. of 1997), 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.

Finally, even if this division/combination is approved, I understand local ordinances and State Acts change from time to time, and if changed the divisions/combinations made here must comply with the new requirements (apply for division/combination approval again) unless deeds representing the approved divisions/combinations are recorded with the Register of Deeds or the division/combination is built upon before the change to laws are made.

**PROPERTY OWNER'S SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*\*Resubmit:

\*\*\*Owner's Signature: \_\_\_\_\_ \*\*\*Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

**REVIEWER'S ACTION:**

- ☐ **Approved:** Conditions, if any - \_\_\_\_\_
- ☐ **Denied:** Reasons for denial - \_\_\_\_\_

**FEE PAID: \$** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **CASH/CHECK #:** \_\_\_\_\_

**SIGNATURES:**

Zoning Administrator: \_\_\_\_\_ **Date:** \_\_\_\_\_

Township Assessor: \_\_\_\_\_ **Date:** \_\_\_\_\_

**RESUBMIT WITHIN 30 DAYS  
APPEAL INFO**

Decision:

- ☐ **Approved:** Conditions, if any-- \_\_\_\_\_
- ☐ **Denied:** Reasons for denial-- \_\_\_\_\_

ZBA Chairman Signature/Zoning Admin: \_\_\_\_\_ **Date:** \_\_\_\_\_