

**LAND DIVISION APPLICATION  
CATO TOWNSHIP**

Return to: CATO TOWNSHIP, Marcy Myers, 203 Macomber ST Lakeview, MI. 48850. Phone (989) 493-0643  
 Approval by your local municipality is required before property may be sold. Approval of a division is not a determination that the resulting parcels comply with any other ordinances or regulations [MCL560.109.6].  
 Approval is required for any division of land or a property line adjustment. (The Land Division will be done within 45 days after all requirements are returned)

Name and address where form is to be sent when review is completed:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

1. Address of parcel to be split: \_\_\_\_\_

2. A. Is parcel in: PA 116 – Y N PA 260 – Y N  
 B. Zoning of the parent parcel: R-AG, R-R, S-R, R1, R2, C1, I (circle one)

3. Nearest Cross Road Name: \_\_\_\_\_  
 Parent Parcel Number: \_\_\_\_\_ & \_\_\_\_\_

Legal description of parent parcel (attach extra sheet if needed): \_\_\_\_\_

3. PROPERTY OWNER INFORMATION:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

4. APPLICANT INFORMATION: (if different than property owner):

Contact Person's Name: \_\_\_\_\_  
 Business Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. **Proof of taxes paid:** The Property owner must obtain a receipt from the county treasurer stating that the current taxes have been paid on all stated parcels. **TAX CERTIFICATION.** Provided by the County Treasurer.

6. LAND DIVISION PROPOSAL: [Describe each division(s) being proposed]

A. Number of new parcels: \_\_\_\_\_ B. Intended use (Residential, Commercial, etc.) \_\_\_\_\_  
 C. Legal description of each proposed new parcel (attach extra sheets if needed):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FOR OFFICIAL USE ONLY

CATO TOWNSHIP

Parent Parcel Number: \_\_\_\_\_ Date filed \_\_\_\_\_

Name of applicant: \_\_\_\_\_

Number of splits allowed by statute: \_\_\_\_\_ Number of splits requested \_\_\_\_\_

PA 116 Y N PA 260 Y N Zoning: R-AG, R-R, S-R, R1, R2, C1, I

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_

7. DEVELOPMENT SITE LIMITS: [Check each of the following that represents a condition existing on any part of the parcel]

- is riparian or littoral (river or lake front property)?  includes a wetland?  Did you check w/ MDEQ?
- includes slopes more than 25% (1 to 4 pitch or steeper)?  is within a flood plain?
- is known or suspected to have an abandoned well, underground storage tank or contaminated soils?

8. ATTACHMENTS: [All attachments must be included] Letter each attachment as designated below.

A. **SURVEY**, sealed by a professional surveyor of proposed division(s) of parent parcel; OR a **MAP/DRAWING** drawn to a legible scale of proposed division(s) of parent parcel. (If MAP/DRAWING is furnished the corners of the division must be staked with visible markers) Survey / drawing must show:

- Proposed division(s) with accurate dimensions shown (need 330 ft on road MIN for Ag Res (5 acres MIN) or 165 ft MIN for Rural Res (1 acre MIN). Road frontage length x4 max on the side boundary lines.
- Proposed division(s) marked at the physical site.
- Existing and proposed road/easement rights-of-way (if apply).
- Easements for public utilities for each parcel to existing public utilities (if apply).
- Any existing improvements (buildings, wells, septic systems, driveway, etc.) Please indicate locations on survey / map.

9. AFFIDAVIT and permission for township, county and state officials to enter the property for inspection:

I hereby certify that the information contained on this application is true, and understand that any application and subsequent approval based on false information will be void. Further, I agree to comply with the conditions and regulations provided with this parcel under all applicable State and Local regulations. Deed and other conveyance will include statements required by Public Act 591 of 1996 as to whether the right to make further divisions is proposed to be conveyed and the required statement regarding the Michigan right to farm act. Further, I agree to give permission for officials of the local township, county and the State of Michigan to enter the property where this parcel division is proposed for the purposes of inspection to verify that the information on this application is correct.

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

FEES INVOLVED: \$50 for the first split, plus \$25 for each additional split.  
CHECKS CAN BE MADE OUT TO: Cato Township. (DO NOT SEND CASH)

**DO NOT WRITE BELOW THIS LINE**

Number of new parcels \_\_\_\_\_

TOTAL FEE \$ \_\_\_\_\_  
Receipt No. \_\_\_\_\_

REVIEWER'S ACTION

APPROVED: (Conditions if any)

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\_\_\_ DENIED: (Reasons)

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**'Land Division approval only'**

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