

**Somerset Township**  
 12715 E. Chicago Rd  
 P.O Box 69  
 Somerset Center, MI,49282  
**Phone:** 1 (517)-688-9223  
**Fax:** 1 (517)-688-9132

Received:
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**APPLICATION FOR LAND DIVISION / COMBINATION / ALTERATION**

Applicant Information <small>(owner Authorization Required)</small>		Owner Information (If Different)	
Name:		Name:	
Address:		Address:	
City, State, Zip:		City, State, Zip:	
Phone #:	E-Mail Address:	Phone #:	E-Mail Address:

PROPERTY INFORMATION	
Property Address:	Property ID #:
Total Acreage:	Property ID #:
	Property ID #:
Subdivision (If Applicable):	Property ID #:

**THE FOLLOWING ACTION IS HEREBY REQUESTED BY THE APPLICANT: (PLEASE CHECK ALL APPLICABLE BOXES)**

DIVISION / SPLIT  
 COMBINATION  
 PLAT


MASTER DEED  
 BOUNDARY TRANSFER  
 DESC. CORRECTION


Please note that the attached "Application Check-list" must be completed, signed, authorized and submitted along with this application before anything will be processed.

Applications approved after May 15th, will be processed after the July 1st tax bills are paid in full.  
 Applications approved after October 15th, will be processed after the current year winter tax bills are paid in full.  
 All current and prior taxes must be paid upon date of application, or this application will not be processed.

Resulting Parcels	RATE
1ST	\$60.00
2-4 (ADDITIONAL)	\$20.00
5+	\$10.00

Units	RATE
COMBINATION	\$40.00
Boundary Adj.	\$40.00

Applicant Signature \_\_\_\_\_ Title (Owner/Agent/Other) \_\_\_\_\_ Date \_\_\_\_\_

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*This section is for Official Use Only*

	<u>DATE</u>	<u>SIGNATURES</u>
<b>Zoning Administrator's Action</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	_____	_____
<b>Assessor's Action</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	_____	_____
<b>Township Board Action</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> N/A	_____	(ATTACH MINUTES FOR FILE)

MCL 560.109 (1) A municipality shall approve or disapprove a proposed division/combination/transfer within 45 days after the filing of a complete application for the proposed division with the assessor or other municipality designated official.

## APPLICANT CHECK LIST

- Copy of Receipt    **Application Fee Paid**
- A-1    **Parent Parcel Property Survey / Description**  
Including:    (Existing Property Configurations Labeled as A-1, B-1, C-1,...)  
Legal descriptions should be labeled in similar manner  
Parcel dimensions, tax ID #'s, addresses and roads  
Buildings and land improvements - (locations & setbacks)  
Area calculations should clearly reflect gross, net, actual and proposed  
County drains, floodways & floodplains, utility & access easements and ROW's
- A-2    **Child Parcel Property Survey / Descriptions**  
Including:    (New property configurations labeled as A-2, B-2, C-2...)  
Legal descriptions should be labeled in a similar manner  
Parcel dimensions, addressed and roads  
Building and land improvements - (locations & setbacks)  
Area calculations should clearly reflect gross, net, actual and proposed  
County drains, floodways & floodplains, utility & access easements and ROW's
- Revised Forms    **P.R.E - Principle Residence Exemptions Forms**  
Be aware that PRE's are specific to the parcel numbers.  
If the original parcel numbers change, the applicant is responsible to  
**RESCIND** the parent (old) number, and file a new form using the child  
(new) parcel number(s).
- Copy of Receipt    **Proof of Paid Taxes / Special Assessments**  
A certificate from the county treasurer that complies with PA 23 of 2019.  
Establishing all property taxes/special assessments are paid for the  
prior 5 years to this date on the application.
- Deed    **Proof of Ownership or Letter of Authorization** (if requested)

Please note that the applicant or authorized representative must sign below to acknowledge that the requirements listed on this check list have been satisfied.

The owner/applicant understands that any pro-rated assessed value and taxable values established by the assessor are for the purpose of allocating the proportionate share of the current year values for the following year.

MCL 560.109 (1) A municipality shall approve or disapprove a proposed division/combination/transfer within 45 days after the filing of a complete application for the proposed division with the assessor or other municipality designated official.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title (Owner/ Agent)

Stephenie Kyser  
Hillsdale County Treasurer  
33 McCollum St. Suite 205  
Hillsdale, MI 49242  
Phone (517) 437-4700



### 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 to be divided

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**[ ] CERTIFICATION DENIED**

The Hillsdale 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 Hillsdale County Treasurer's Office certifies that all property taxes and special assessments due on 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 local tax collecting unit. EXCEPTION: This certification being subject to any Board of Review, Tribunal, and/or Principal Resident Exemption Denial.

**[ ] DATED ON OR AFTER MARCH 1, \_\_\_\_\_**

The return of current year delinquent taxes are not available for examination.

Certified by: \_\_\_\_\_ Date Certified: \_\_\_\_\_

\*\*\* THIS PAGE IS FOR ASSESSOR USE ONLY \*\*\*

**SOMERSET TOWNSHIP - SPLIT / COMBINATION FLOW SHEET 2018**

**Parent Parcel(s) - Original**

Parcel Number	Taxpayer / Owner	Property Address	Class	Acreage	2022 SEV	2022 TV	PRE / QA %
				TOTAL	0.000	-	-

**Child Parcel(s) (Created and/or Resulting)**

Parcel Number	Taxpayer / Owner	Property Address	Class	Acreage	2022 Allocated SEV	2022 Allocated TV	PRE / QA %
				TOTAL	0.000	-	0%