

Clam Lake Township

Wexford County

8809 E. M-115

Cadillac, Michigan 49601

PH: (231) 775-5401 • FAX: (231) 779-1225

TOWNSHIP BOUNDARY ADJUSTMENT APPLICATION

Property Owner (Providing Land)

Property Owner (Receiving Land)

Name:

Name:

Address:

Address:

City, State, Zip Code

City, State, Zip Code

Phone Number

Phone Number

1) Parcel (Providing Land) Information:

- a) Location of parcel to be adjusted (Address/Road Name): _____
- b) Current parcel legal description (Please Attach): _____
- c) Current parcel acreage: _____
- d) Has the parcel previously been divided? _____
- e) Parcel acreage after adjustment: _____
- f) Width of parcel after adjustment: _____
- g) Parcel legal description after adjustment (Please Attach): _____
- h) Parcel Identification Number _____

2) Parcel (Receiving Land) Information

- a) Location of parcel to be adjusted (Address/Road Name): _____
- b) Current parcel legal description (Please Attach): _____
- c) Current parcel acreage: _____
- d) Has the parcel previously been divided? _____
- e) Parcel acreage after adjustment: _____
- f) Width of parcel after adjustment: _____

g) Parcel legal description after adjustment (Please Attach): _____

h) Parcel Identification Number: _____

3) **Site Limits** (Please indicate if any of the limitations below exist on the parcel)

___ Waterfront property (river, lake, pond etc.)

___ Wetlands

___ Is within a flood plain ___ Includes a beach

___ Is on muck soils or soils known to have severe limitations for on site sewage system

4) **Attachments** (Please include the following attachments and label each attachment appropriately)

a) A survey of the Parent Parcel drawn to scale which includes the following:

i) Location and dimensions of the land to be conveyed

ii) Existing and proposed road/easement right-of-way(s)

iii) Legal description of proposed new road, easement or shared driveway

iv) Utility easements to new parcel from existing utilities

v) Any existing improvements (buildings, wells, septic system, driveways, etc.)

b) Proof that all taxes upon the properties have been paid in full (County Tax Certificate for 5 Years)

c) Fee made payable **to Clam Lake Township in the amount of \$150.00**

5) **Acknowledgment**

The undersigned acknowledges that any approval of this application is not a determination that the resulting parcels comply with other applicable ordinances, rules or regulations which may control the use or development of the parcels. The undersigned agrees that the statements made in this application are true and correct and acknowledges that, if found not to be true, this application and any approval will be void.

Owner signature

Date

Owner Name Printed

Owner signature

Date

Owner Name Printed

..... Office Use Only – Please do not write below this line

_____ Approved: (With conditions below, if any)

_____ Denied: (Please include reasons for denial)

Molly Whetstone Clam Lake Township Assessor