

Supervisor: 989-684-8931
 Clerk: 989-684-8041
 Treasurer: 989-684-8531
 Fire Dept. 989-684-8504



Assessor: 989-684-7100
 Inspection: 989-684-5427
 Enforcement: 989-684-9700
 Fax: 989-684-5644

LOT LINE ADJUSTMENT APPLICATION

1. LOCATION OF PARCELS INVOLVED

Date Received:	Application Fee:
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A. Location of parcel TRANSFERRING THE LAND:

Address (if applicable):	
Parcel Identification Number:	
Zoning District:	
Current Lot Width:	Current Lot Size:
Lot Width After Transfer:	Lot Size After Transfer:

B. Location of parcel RECEIVING LAND:

Address (if applicable):	
Parcel Identification Number:	
Zoning District:	
Current Lot Width:	Current Lot Size:
Lot Width After Transfer:	Lot Size After Transfer:

2. NAMES OF ALL PARTIES:

A. Owner of PARCEL TRANSFERRING LAND:

Name(s):
Mailing Address:
Contact Phone Number(s): () - () -

B. Owner of PARCEL RECEIVING LAND:

Name(s):
Mailing Address:
Contact Phone Number(s): () - () -

3. PROPERTY SURVEY: A survey, sealed by a professional surveyor, at a scale of 1" = 100' of the proposed transferring and receiving parcels **OR** A map or drawing of the proposed divisions drawn to a scale of no less than 1" = 100'

- North Arrow, Date and Scale, Existing Easements and Proposed Easements
- Existing Parcel Boundaries and Legal Description of Transferring and Receiving Parcels
- Boundaries/Dimensions and Legal Description of Proposed Transferring and Receiving Parcels

4. CRITERIA FOR ZONING APPROVAL

- A. Both resulting parcels must meet minimum Zoning standards.
- B. Scale drawing showing location of existing structures/improvements on transferring and receiving parcels.
- C. Scale drawing detailing the resulting setbacks front, rear and sides on the proposed transferring and receiving parcels.
- D. Yard space and off-street parking minimums must be met.

5. APPLICABLE FEES - TERMS & CONDITIONS

- A total fee of \$ _____ Fee Structure: \$100.00 plus \$15.00 per each new legal description must accompany this application (i.e. if you modify two lots, the fee is \$130.00.) If an application is filed after the deed has been recorded, the fee will increase to \$200.00 plus \$30.00 per each new legal description.
- If applicable, a copy of any required DNR Permit or Natural Rivers Zoning Approval would also need to be submitted.

6. AFFIDAVIT

I/We agree the statements made above are true and accurate and if found not to be true or accurate, this application and any approval granted will be null and void. I/We understand that approval of boundary adjustments is not a determination or implication that any resulting parcels are buildable. All provisions of township ordinances and building requirements must be satisfied prior to approval of any development. Nor does approval determine that adequate water and septic/sewer capacity is available on the resulting parcels/lots. If necessary, I/We also give permission for municipal, county and state officials to enter the property for inspections.

Signatures of all parties:

A. OWNER OF PARCEL TRANSFERRING LAND

Signature: _____	Date: _____
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B. OWNER OF PARCEL RECEIVING LAND

Signature: _____	Date: _____
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~ DO NOT WRITE IN BELOW SECTION – FOR OFFICIAL TOWNSHIP USE ONLY ~

Assessing Dept: Complete Application Received: _____ Fee Rec: _____ CK# _____

Submitted to Zoning Administrator Date: _____

Zoning Administrator: Approved w/Conditions (See Below) Denied (See Attached)

Conditions: _____

Signature: _____ Date: _____

Assessor: Approved w/Conditions (See Below) Denied (See Attached)

Conditions: _____

Assessor Denial of Application: Date _____

Charter Township of Bangor Assessor

Reason/s _____

Assessor Final Approval Lot Line Adjustment Application: _____ Date: _____

Charter Township of Bangor Assessor

Tentative Parcel Identification Number year following approved application

010-____ - ____ - ____ - ____	010-____ - ____ - ____ - ____
Transferring Parcel	Receiving Parcel