

# Boundary Change Application

You MUST answer all questions and include all attachments, or this will be returned to you. Bring or mail to the Municipality's Land Division Official.

Land Division Official  
Dale Hutson  
60450 Farrand Rd.  
Colon, MI 49040  
Ph.# 269-432-2834  
[dalehutson@chartermi.net](mailto:dalehutson@chartermi.net)

1. Applicant information: (property owner)

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: # \_\_\_\_\_, Road Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

2. Other OWNER information:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: # \_\_\_\_\_, Road Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

3. PARCELS:

	Street Address
Parent parcel number: 75- - - - -	_____
Parent parcel number: 75- - - - -	_____
Parent parcel number: 75- - - - -	_____
Parent parcel number: 75- - - - -	_____
Parent parcel number: 75- - - - -	_____
Parent parcel number: 75- - - - -	_____

4. PROPOSAL: Describe the adjustment being proposed:

A. Property line adjustment? Resolve setback issue? Other \_\_\_\_\_

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

C. Does this change affect road frontage? Yes or No (circle one)

If yes are the affected parcels maintaining the required frontage/width? Yes or No (circle one)

If no this change creates a non-conforming parcel you need to provide the variance granted for this change.

5. DEVELOPMENT SITE LIMITS

Is the property in a government program (PA116, PA260, Forestry, Conservation...)? Yes or No (circle one)

If yes what program? (PA116, PA260, Forestry, Conservation...) \_\_\_\_\_

Attach proof this property is removed from those programs.

6. ATTACHMENTS (all attachments must be included). Letter each attachment as shown here.

- \_\_\_\_\_ A. Map, drawn to scale of \_\_\_\_\_ (insert scale), of proposed division(s) of the percent parcel showing:
  - (1) the proposed boundary change, to include dimensions with calculated area of all affected parcels, and
  - (2) legal descriptions of all affected parcels, and
  - (3) existing and proposed road/easement rights-of-way, and
  - (4) easements for public utilities from each parcel to existing public utility facilities, and
  - (5) location of any existing improvements (buildings, wells, septic system, driveways, etc.) in relation to existing and proposed lot lines, and
  - (6) any of the features checked in question number 6, and
  - (7) any cemetery which is adjacent to, or may have had access through this parcel.
- \_\_\_\_\_ B. Indication of approval, or permit from the County Road Commission, MDOT, or respective city/village street administrator, for each proposed new road, easement or shared driveway.
- \_\_\_\_\_ C. Tax Certification from County Treasurer for all affected parcels.
- \_\_\_\_\_ D. Fee for application (See Fee Schedule) check payable to Hutson Assessing Inc.

7. AFFIDAVIT and permission for township and village officials to enter the property for inspections:

I agree 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 boundary change. Further, I agree to give permission for officials of the Township, Village, County and the State of Michigan to enter the property where this boundary change is proposed for purposes of inspection to verify the information on the application is correct. Finally, I understand this is only a boundary change which conveys only certain rights under the municipal ordinance, and is not a representation or determination the resulting parcels comply with other ordinances or regulations, and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights.

Further, I understand the municipality granting approval of this boundary change is not liable if a building permit is not issued for the parcel due to non-approvable on-site water or on-site sewage disposal. Checking with the District Health Department for septic and water is the landowner's responsibility.

Finally even if this boundary change is approved, I understand zoning, local ordinances and State Acts change from time to time, and if changed the boundary change made here must comply with the new requirements (apply for boundary change approval again) unless deeds, land contracts, leases or surveys representing the approved boundary change(s) are recorded with the Register of Deeds or the boundary change is built upon before the changes to laws are made.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE!

**Official use only!**

stamp date rec'd

Fee Received: \_\_\_\_\_ CK# \_\_\_\_\_ Control # \_\_\_\_\_

Incomplete Application returned date: \_\_\_\_\_ Resolved date: \_\_\_\_\_

Forwarded to Zoning Administrator for review: \_\_\_\_\_  
date

Received from Zoning Administrator: \_\_\_\_\_  
date

Zoning Review:  Approved  Denied See attached letter.