

**FOR OFFICE USE ONLY**

GIS ☐ ASG ☐ MAP ☐

DEED (if applicable) ☐

ACKNOWLEDGEMENT (if applicable) ☐

## Land Combination Application

Answer all questions and include all attachments or the application will be returned unprocessed. **A \$100.00 application fee is required with your request.** Make checks payable to Oshtemo Township.

### 1. Property Owner Information:

Name(s) \_\_\_\_\_ Phone(    ) \_\_\_\_\_

Address \_\_\_\_\_

### 2. Location of parent parcel(s) to be Combined:

Address \_\_\_\_\_ Parcel ID #3905-\_\_\_\_-\_\_\_\_-\_\_\_\_

Address \_\_\_\_\_ Parcel ID #3905-\_\_\_\_-\_\_\_\_-\_\_\_\_

Address \_\_\_\_\_ Parcel ID #3905-\_\_\_\_-\_\_\_\_-\_\_\_\_

Legal Descriptions (attach additional sheet(s) if necessary)

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### 3. Proposed Combination

- \_\_\_\_\_ Combining for tax purposes only  
\_\_\_\_\_ Combining with a Deed

**4. Affidavit and permission for Oshtemo Township, Kalamazoo County and State of Michigan officials to enter the property for inspections:**

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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 Combination. Finally, I understand this is only a combination which conveys only certain rights under the applicable local land division ordinance, the local zoning ordinance, and the State Land Division Act (formerly the Subdivision Control Act, P.A. 288 of 1967, as amended (particularly by P.A. 591 of 1996), MCL 560.101 et. Seq.), and /or the Condominium Act (PA 59 of 1987 as amended) and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights.

Finally if this Combination is approved, I understand Deeds, or Land Contracts representing the approved divisions may be required and recorded with Register of Deeds, or any approval will be void.

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Property Owner(s) Signature

Date

Approval from the Health Department for on-site water and septic systems is no longer required (by statute) for parcels larger than one acre. This approval will be required prior to a building permit being issued.

This form is designed to comply with applicable local zoning, land division ordinances and Sec. 109 of the Michigan Land Division Act (formally the subdivision control act. P.A. 288 of 1967, as amended [particularly by P.A. 591 of 1996]. MCL 560.101 et Seq.) and/or the Condominium Act (PA 59 of 1987 as amended)

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**Office Use Only**

Parcel ID # 3905-\_\_\_\_-\_\_\_\_-\_\_\_\_

Application/#\_C\_\_\_\_\_

Parcel ID # 3905-\_\_\_\_-\_\_\_\_-\_\_\_\_

\_\_\_\_Planning/Zoning Official Approval

\_\_\_\_**Approved** – Conditions if any\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_**Denied** – Reasons\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_Signature(s)/Title(s)

\_\_\_\_Date



# Thomas Whitener

## Kalamazoo County Treasurer

201 W Kalamazoo Ave Rm 104, Kalamazoo, MI 49007 | 269-384-8124 | treasurer@kalcounty.com

### Land Division Tax Payment Certification Form

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

Owner Address: \_\_\_\_\_

Owner City, State, Zip: \_\_\_\_\_

Property Address: \_\_\_\_\_

Property City, State, Zip: \_\_\_\_\_

Parcel ID Number: \_\_\_\_\_

All applications must include:

- (1) The surveyed legal description of the parcel to be divided
- (2) \$5 certification fee (made payable to the Kalamazoo County Treasurer)
- (3) A self-addressed, stamped envelope

PLEASE DO NOT WRITE BELOW THIS LINE:

#### Reviewer's Actions

☐ **Certification Denied**

Denial explanation:

☐ **Certification Approved**

I certify that, as to the lands herein described, all property taxes and special assessments turned over to the County Treasurer for collection on the parcel or tract subject to the proposed division for the 5 years preceding the date of the application have been paid except that if checked below:

☐ This certificate does not cover taxes or current special assessment installments for the most recent year because the delinquent tax roll is not yet available.

Treasurer's Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_