

**WELLS TOWNSHIP**  
**LAND BOUNDARY ADJUSTMENT APPLICATION**

\*\* Please complete all questions and include all attachments, or this application will be returned to you. When completed mail to:

**Susan Jensen**  
**4243 Barnes Rd**  
**Millington, MI 48746**  
**Phone: (989) 871-5649 Email: [assessor@wellstwp.org](mailto:assessor@wellstwp.org)**

This form is designed to comply with applicable local zoning, land division ordinances and §109 of the Michigan Land Division Act (formerly the subdivision control act. P.A.288 of 1967, as amended (particularly by P.A. 591 of 1996, PA87 of 1997 and PA23 of 2019), MCL 560.101 et seq.)

**APPLICATION FEE: \$50. The fee is non-refundable for void or denied applications. Check payable to: WELLS TOWNSHIP.**

**OFFICE USE ONLY, PLEASE DO NOT MARK IN BOX BELOW.**

PARCEL ID#(S) _____	
_____ <b>APPROVED:</b> Conditions, if any _____	
_____	
_____	
_____ <b>DENIED:</b> Reason _____	
_____	
_____	
SIGNATURE – Assessor _____	DATE _____

**\*APPROVAL IS ALWAYS CONTIGENT ON THE TRANSFER OCCURING WITHIN NINETY (90) DAYS OF APPROVAL. THE CONVEYANCE SHALL BE RECORDED WITH THE COUNTY REGISTER OF DEEDS OFFICE AND A COPY SUPPLIED TO THE TOWNSHIP. IT IS UNDERSTOOD THAT THE LAND TRANSFERRED IS ATTACHED TO EXISTING PARCELS AND THAT NO NEW PARCELS ARE CREATED.**

1. Parcel ID# of Parcel Releasing Land: \_\_\_\_\_

Property Owner Information:

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

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

Phone: (\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

2. Parcel ID# of Parcel Acquiring Land: \_\_\_\_\_

Property Owner Information:

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

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

Phone: (\_\_\_\_) - \_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

3. Is any of the property enrolled in a PA116 program with the state of Michigan? If so, which parcel(s)?  
\_\_\_\_\_

4. ATTACHMENTS: (ALL ATTACHMENTS **MUST** BE INCLUDED FOR APPLICATION TO BE PROCESSED). Letter each attachment as shown here. Label each legal description to correspond with the survey.

A. A survey or map/drawing of parent parcel drawn to a scale of 1" = 20', 1" = 50', 1" = 100', 1" = 200', 1" = 400' or 1" = 1,000'. The scale used shall best represent the property AND IMPROVEMENTS. The assessor may refuse any map/drawing.

THE SURVEY OR MAP/DRAWING WILL INCLUDE THE FOLLOWING:

1. The labeled proposed adjustments
2. Dimensions and acreage of the proposed adjustments.
3. Scaled location of any improvements (buildings, wells, septic systems, etc.)

B. A legal description for the parcel to be released, a legal description for the new tract that has acquired land and a legal description for the parcel after it has released land.

C. Proof from the Tuscola County Treasurer that all taxes and assessments have been paid.

**AFFIDAVIT** – 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 GIVE PERMISSION FOR OFFICIALS OF THE MUNICIPALITY, COUNTY AND THE STATE OF MICHIGAN TO ENTER THE PROPERTY WHERE THIS PARCEL DIVISION IS REQUESTED FOR PURPOSES OF INSPECTION TO VERIFY THAT THE INFORMATION ON THE APPLICATION IS CORRECT AT A TIME MUTUALLY AGREED WITH THE APPLICANT. I UNDERSTAND THIS IS ONLY A PARCEL ADJUSTMENT WHICH CONVEYS ONLY CERTAIN RIGHTS UNDER THE APPLICABLE LOCAL LAND DIVISION ORDINANCE, THE LOCAL ZONING ORDINANCE, AND THE STATE LAND DIVISION ACT AND DOES NOT INCLUDE ANY REPRESENTATION OR CONVEYANCE OF RIGHTS IN ANY OTHER STATUTE, BUILDING CODE, ZONING ORDINANCE, DEED RESTRICTION OR OTHER PROPERTY RIGHTS. TOWNSHIP LAND DIVISION APPROVAL IN NO WAY GUARANTEES THE ISSUANCE OF A BUILDING PERMIT. I ALSO REALIZE THAT TAXES MUST BE PAID IN FULL ON THE BOTH PARCELS AND THE DEEDS TO BE RECORDED AT THE COUNTY LEVEL TO FINALIZE THE ADJUSTMENT.

\_\_\_\_\_  
**PROPERTY OWNER RELEASING LAND SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PROPERTY OWNER ACQUIRING LAND SIGNATURE**

\_\_\_\_\_  
**DATE**