

**South Haven Charter Township**  
**09761 Blue Star Hwy South Haven MI 49090**  
**269-637-3305 [shtwp.zoninga@gmail.com](mailto:shtwp.zoninga@gmail.com)**

**Zoning Department 111 Grand St Allegan MI 49010 1-800-626-5964 [mtsallegan@frontier.com](mailto:mtsallegan@frontier.com)**

### **LAND DIVISION APPLICATION INFORMATION SHEET**

1. Each land division must meet all requirements of Land Division Act and the South Haven Charter Township Land Division Ordinance.
2. Each newly-created parcel must meet requirements of the Zoning Ordinance for the zoning classification.
3. Verification that taxes and special assessments have been paid. Van Buren County Tax Certification form must be completed by the County Treasurer.
4. Application must be signed by the owner(s) and the applicant (if applicable).
5. Attach copy of survey and new proposed legal descriptions.
6. Attach copy of current deed.
7. Following the approval, the division must be recorded with the Van Buren County Register of Deeds within 90 days after approval or approval shall be null and void.
8. Application fee: \$75.00 for first division and \$10.00 each additional division; make payable to South Haven Township.

NOTE: A new homestead application should be applied for by the owner/applicant and application should be filed with the Township by May 1st of the year to be on the next tax bill cycle.

## **SOUTH HAVEN TOWNSHIP LAND DIVISION APPLICATION**

### **Property Owner**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Email \_\_\_\_\_

### **Applicant (if applicable)**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Telephone \_\_\_\_\_ Email \_\_\_\_\_

### **Describe Property to be Split**

Address/Location \_\_\_\_\_  
Current parcel number 80-17- \_\_\_\_\_ map/plate number \_\_\_\_\_  
Current Zoning Classification \_\_\_\_\_

### **Describe Requested Division** (For example, "Split two 1 acre lots from 8 acre parent parcel as shown on attached drawing").

\_\_\_\_\_

Describe ownership of future division rights (ie. transfer to new parcel(s) or retain by parent) \_\_\_\_\_

Will parcel change ownership? Yes ( ) No ( ). When will new deed be recorded at the County? \_\_\_\_\_

Attach proposed legal descriptions and survey. Survey must show:

- dimensions and acreage (excluding road right-of-ways) of each new parcel.
- location of roads for each lot.
- locations of existing structures with distances from proposed lot lines.
- legal description of parent, new division(s) and remainder parent

Signature of Owner(s) \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**SOUTH HAVEN TOWNSHIP LAND DIVISION**

--- OFFICIAL USE ONLY. DO NOT WRITE BELOW THIS LINE-----

Payment: \_\_\_\_\_

Address \_\_\_\_\_

Parcel No \_\_\_\_\_

ACTION:

\_\_\_\_\_ Approved

\_\_\_\_\_ Approved with conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
                    Zoning administrator / Supervisor

\_\_\_\_\_ Denied

Reasons for Denial: Ordinance Section \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_



## Office of the County Treasurer

Trisha Nesbitt, Treasurer  
Tania Sheeley-Myers, Chief Deputy

219 East Paw Paw Street, Suite 101  
Paw Paw, Michigan 49079-1499  
Phone: (269) 657-8228 Fax: (269) 657-8227  
E-mail: NesbittT@vbco.org

### 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) A legal description of the parcel to be divided
- (2) \$5 certification fee (made payable to the Van Buren 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 due 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 this certificate does not cover taxes for the most recent year because the delinquent tax roll is not yet available.

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