



TOWNSHIP OF WORTH
Sanilac County, Michigan
6903 S Lakeshore Rd.
Lexington, Michigan 48450
Ph (810)359-8852 Fax (810)359-7027

Procedure for Splits/Combinations of Land in Worth Township

1. Apply at Worth Township offices with a fully executed split application, \$175 application fee, and copy of a certified survey.
2. Fill out and submit (in person or by mail) the attached Land Division Tax Payment Certification Form to the Sanilac County Treasurer's Office, along with payment of \$5.00. The County Treasurer's Office is located at the Courthouse at 60 W Sanilac Ave, Sandusky, MI 48471, and located on the 2nd floor.
3. Submit approval requests to the applicable public utility right-of-way contacts on the following sheet: Electric (DTE), Semco Gas (if applicable), and the Sanilac County Road Commission. These will need to be provided to the assessor before final approval can be obtained. These approvals can be emailed to the assessor@worthmi.org, or by dropping off at the township office. Please start these approval requests immediately, as it may take some time to obtain approvals from these entities.

****Please review the following split/combination requirements prior to application submission****

- Worth Township requires all sewer and water assessments (any special assessments) to be paid in full, prior to any split and/or combinations.
- ALL taxes (current and delinquent) must be paid and current on each parcel that is affected by a combination and/or split.
- Surveys must include a legal description and drawing for proposed divisions as well as remaining parcels. Survey must also show buildings and setbacks to proposed lot lines, if the proposed division and/or combination contains buildings of any sort.
- If splitting a piece of property and combining with another piece, you will need a completed split application for the split, as well as a completed combination application for the combine.
- Worth Township does not allow for mid-year splits. Therefore, please make arrangements with your closing agent to prorate taxes appropriately, if the split is part of a sale. Taxes will not be separated until the following year's tax roll. The property taxes will remain in the seller's name for the Summer and Winter tax bill of the current year of the approved split. If the closing agent needs assistance in a percentage assignment of value for prorations, please contact the assessor (assessor@worthmi.org) for assistance.
- Please allow a minimum of 3 weeks (up to 45 days) for approval. If you are wanting to split and/or combine for a sale, please plan accordingly.
- Approval of a division and/or combination is not a determination that the resulting parcels comply with other ordinances or regulations and is not a guarantee that a building permit will be issued.



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DTE (application attached)

LaDonna Jackson, Facilitator Right-of-Way

Mt. Clemens Service Center 43230 Elizabeth, Clinton Twp, MI 48036

Ladonna.jackson@dteenergy.com (best option and quickest turnaround time)

Phone (586)783-1978

Sanilac County Road Commission (application attached)

100 S Elk St, Sandusky, MI 48471

Ph(810)648-2185 Fax (810)648-5810

SEMCO Energy

No application required. Please send copy of the survey along with the parcel id #, address, and owner name to:

Patrick Hurd, Right of Way Agent, 1411 Third St, Ste A., Port Huron, MI 48060

Ph(810)887-3041, Fax (810)887-4233

Email Patrick.hurd@semcoenergy.com (best option and quickest turn around time)



LAND SPLIT Service Application

Please complete and return your application to DTE, at the Regional Center address listed below.

<i>(For DTE use)</i>	
Work Order _____	Date Received _____

Return Address:

Mt. Clemens Service Center, 43230 Elizabeth Rd., Clinton Twp. MI 48036

LaDonna Jackson-Right of Way Facilitator-(586) 783-1978

E-mail: ladonna.jackson@dteenergy.com

Property Owner Name: _____

Current Address: _____

Phone Number _____

Name of person to be contacted in case of questions _____

Daytime Phone Number: () _____ Evening Phone Number:() _____

Property/Tax I.D. # _____

City/Township/Village: _____

If assigned by municipality:

Address No.: _____ Street Name: _____

Nearest intersection: _____

Subdivision name: _____

NOTE: The legal owner of the property must sign this application, unless the party acting instead of the legal owner has power of attorney or legal guardianship. Please provide proof of such.

Required Information

- a) **Proof of Ownership** – Recorded Warranty Deed/Land Contract with Title Deed OR Title Insurance **Final** Policy
- b) **Certified Survey** of Parent Parcel *showing splits*
- c) **Certified Survey** with written description of the proposed splits

NOTE: PLEASE ALLOW 4–6 WEEKS FOR PROCESSING.

Applicant's Signature: _____

Date: _____



Sanilac County Road Commission

Land Split Approval Request

Name: _____ Date _____

Location of Proposed Lot Split:

Property Tax ID # _____

City/Township/Village: _____ Worth _____

Address No: _____

Nearest Intersection: _____

Subdivision Name: _____

Section: _____

Requested By: (Please Print) _____

Phone # _____

Applicant, Please Mail or Fax to:

Sanilac County Road Commission
35 Flynn St.
Sandusky, MI 48471
Fax (810)648-5810

For Questions Please Call:

Phone (810)648-2185



Trudy M. Bowers
Sanilac County Treasurer
60 W. Sanilac, Room 204
Sandusky, MI 48471
Phone (810) 648-2127 Fax (810) 648-5479
tnicol@sanilacounty.net

Land Division Tax Payment Certification Form

Name: _____ Phone: _____

Owner Address: _____

Owner City, State, Zip: _____

Property Address: _____

Property City, State, Zip: _____

Parcel ID Number: _____

Attach a description of the parcel to be divided

CERTIFICATION DENIED

The Sanilac County Treasurer's Office has found delinquent taxes on the parcel listed above and cannot issue a certification of tax payment.

Delinquent Taxes Owed: _____

CERTIFICATION APPROVED

Pursuant to House Bill 4055, the Sanilac County Treasurer's Office certifies that all property taxes and special assessments due on the above parcel subject to the proposed division for the five years preceding the date of the application have been paid. This certification does not include taxes, if any, now in the process of collection by the City, Village or Township Treasurer.

Certified by: _____ Date Certified: _____

Worth Township

Application for Property Combination

Documentation Required for Application:

- Must supply a survey of combination plans if not in a plotted subdivision.
- Survey must show location of all buildings.
- Must supply most current deeds, death certificates etc. to confirm ownership.
- All past due and current Taxes must be paid prior to combination.

Owner Name(s): _____ Phone # _____ E-mail: _____

Mailing Address: _____

Parcel Numbers to be combined: _____

Street Address of non-vacant parcel: _____ or N/A

Total Acreage of Combined Parcels if not in a plotted subdivision: _____

I have read the specifications and all legalities printed on the back of this page.

Signature of Applicant _____ Date ____/____/____

Office use only below this line.

Municipality Review and Approval

**This Review Expires After a Period of 180 Days **

MCL 560.109 Municipality will approve/disapproved proposed division within 45 days after filing. Turn in COMPLETED application and attachments listed above of the proposed division to the Assessor.

___ Taxes are Current

___ Water Assessment Balance \$ _____ Parcel # _____

___ Sewer Assessment Balance \$ _____ Parcel # _____

___ Street Lights _____ How many of them? _____

Treasurer's Signature: _____

___ Complies with zoning requirements

___ Adequate and Accurate legal descriptions (attached and provided)

___ Accessibility provides vehicular access to existing road or street ___

Public Utility Easements (gas, electric, water)

New Parcel #

Assessor's Signature: _____

Specifications to Qualify for a land combination application:

All land combinations applications are reviewed by Worth Township for consideration. All attachments and payment for splits must be complete before parcel will be considered for approval.

AFFIDAVIT: and permission for municipal, county and state 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 provide with this parent parcel division. Further, I agree to give permission for officials of the municipality, county and State of Michigan to enter the property where this parcel division is proposed for purposes of inspections to verify the information on the application is correct at a time mutually agreed with the applicant. Finally, I understand this is only a parcel division which conveys only certain rights under the applicable local land division ordinance and the State Land Division Act (formerly the Subdivision Control Act. P.A. 288 of 1967 as amended (particularly by P.A. 491 of 1996). MCL 560.101 et. seq and does not include any representation or conveyance of rights in other statutes, building codes, zoning ordinance, deed registration or other property rights.

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

Notes:
