



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 2<sup>nd</sup> 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](mailto: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](mailto: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](mailto:Ladonna.jackson@dteenergy.com) (best option and quickest turnaround time)

Phone (586)783-1978

**Sanilac County Road Commission**

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](mailto: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.

(For DTE use) Work Order _____	Date Received _____
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**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:** \_\_\_\_\_



**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

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**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 Split**

Parent Tax ID Number to be split: \_\_\_\_\_

Street Address of Parent Parcel: \_\_\_\_\_

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

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

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

**Documentation required at time of submission:**

- Letter of Approval from DTE (586-412-4760)
- Letter of Approval from Sanilac County Road Commission Permits Division (810-648-2185)
- Copy of Survey: Survey must show location of all buildings
- Copy of Registered Deed
- Copy of Approved Private Road and/or Easement if not on Public Road (Register of Deeds)

*Complete all information for review of compliance of P.A. 591 of 1997 (Land Division Act of 1997)*

Total Acreage of Parcels \_\_\_\_\_ Number of Divisions requested \_\_\_\_\_

**Please check all that apply to Parent Parcel**

Taxes are Current

City Water  Parent Parcel has curb stop  Well  City Sewer  Septic

New Parcels will have road frontage on:

County Road  Private Road  Existing Easement  New Private Road  New Easement

Future Division Rights will remain with the remainder of:  Parent Parcel  Child Parcels

To be completed by office personnel only:

**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.

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)

Taxes are Current \_\_\_\_\_ (Treasury Intl.)  Special Assessment Balance \$ \_\_\_\_\_

New Taxable Parcel being created Parent # \_\_\_\_\_

Child # \_\_\_\_\_ Child # \_\_\_\_\_ Child # \_\_\_\_\_

Approved: Assessor's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*\* The above signature authorizes for new parcel splits/combinations to be added to the tax roll.\*\***

Disapproved:

Notes: \_\_\_\_\_

**Specifications to Qualify for a land split application:**

If parcel is 10 acres or less, each has a depth to width ratio of 4 to 1 as provided by ordinance

Parcels have at least a road frontage of 100ft in Residential and 54,450sq ft. in Agricultural / Residential.

Parcels have at least an area of 20,000 sq. ft. in Residential and 54,450 sq. ft. in Agricultural / Residential.

**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 provided 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.

Property Owners Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Received by Worth Township Clerk for Records: Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_