

CITY OF FRASER ASSESSING DEPARTMENT
33000 Garfield • Fraser, MI 48026 • 586-293-3100

PROPERTY SPLIT/COMBINATION APPLICATION

(Revised 4/2022)

Application Date: _____

INSTRUCTIONS: This completed application, when filed with the necessary materials outlined below, will initiate the process of a property split or combination. The application must be in accordance with all applicable provisions of the City of Fraser Ordinances and the Land Division Act. Complete each section of the application and provide all required documents. Incomplete applications will not be accepted. If access, utility, or shared parking, etc. agreements are required, they MUST BE SUBMITTED at the time of application. Additional fees will be charged for the City attorney’s review of any necessary agreements.

Purpose: Split Combination Boundary Adjustment

Change for Tax Year: _____ (the year following the application year)

Please note that applications approved in each calendar year will have new parcel identification numbers assigned to them, but these changes will have no effect on property assessments or taxes until the following year.

Existing Parcels Affected

Please Print Clearly

CURRENT PROPERTY OWNER(S)

CURRENT LEGAL DESCRIPTION(S)

Name: _____	Sub: _____
Mailing Address: _____	Lot: _____ Zoning: _____
_____	Property Address: _____
Phone # _____	Parcel ID # _____

Name: _____	Sub: _____
Mailing Address: _____	Lot: _____ Zoning: _____
_____	Property Address: _____
Phone # _____	Parcel ID # _____

Name: _____	Sub: _____	
Mailing Address: _____	Lot: _____	Zoning: _____
_____	Property Address: _____	
Phone # _____	Parcel ID # _____	

(Attach additional sheet if necessary)

ANSWER YES OR NO TO THE FOLLOWING QUESTIONS:

- Proof of ownership of all parcels affected is attached: Yes No
- Proof that all property taxes and special assessments are paid: Yes No
- Tax Certification Stamp from Macomb County Treasurer on application: Yes No
- Approval letter from DTE is included (application is attached): Yes No
- Surveys with Legal descriptions of all parcels provided: Yes No
All applications must include a legal description and location map of all parcels that exist before and will exist after the application process. The exiting parcel(s) survey should be labeled as "Exhibit A" and the proposed parcel(s) survey should be labeled as "Exhibit B". The surveys must be prepared by a licensed surveyor showing the dimensions and legal descriptions of all existing parcels, the parcels proposed to be created, the location of all existing structures and other land improvements, and the accessibility of the parcels for vehicular traffic and utilities from the existing public roads. See City of Fraser Ordinances, Chapter 12.5-LAND DIVISION for a complete list of requirements. The surveys must also comply with the CERTIFIED SURVEYS Act 132 of 1970. Please provide 3 copies of these documents on letter or legal size paper and PDF if requested.
- Application fee included: Yes No
*Split: \$350 plus \$50 for each resulting parcel (for example, 1 parcel split into 2 = \$350 + \$50 + \$50 = \$450)
Combination or boundary adjustment: Two (2) parcels - \$250. Three (3) or more parcels - \$300.*

*****IF YOU ANSWERED "NO" TO ANY OF THE ABOVE, THE APPLICATION IS INCOMPLETE AND WILL NOT BE ACCEPTED*****

Are any of the above properties under a land contract? Yes No

If yes, this application must include a copy of the recorded land contract for each parcel. The land contract "seller" must be a co-applicant of this application and sign below. A notarized letter of authorization or letter of authorization including driver's license is also required.

Principal Residence Exemption (PRE) in place: Yes No

If yes, the exemption for original parcel(s) must be rescinded and a PRE form must be submitted for the newly created parcel(s).

The legal owners of ALL parcels involved in this request must sign this application and include a copy of their driver's license. Project representatives must provide a notarized letter of authorization from all owners if signing on behalf of the legal owner(s). Attach additional sheet if necessary.

Owner name: _____ Date: _____

Signature: _____ Email: _____

Owner name: _____ Date: _____

Signature: _____ Email: _____

Project Representative's Information (Required):

Name: _____ Company Name: _____

Address: _____ Phone: _____

Signature: _____ Email: _____

FINANCE

Approved **Denied** _____ Date _____

Signature of Superintendent or Authorized Representative

Comments: _____

WATER & SEWER DEPARTMENT

Approved **Denied** _____ Date _____

Signature of Superintendent or Authorized Representative

Comments: _____

BUILDING DEPARTMENT/PLANNING/ZONING

Approved **Denied** _____ Date _____

Signature of Building Official or Authorized Representative

Comments: _____

ENGINEERING

Approved **Denied** _____ Date _____

Signature of City Engineer or Authorized Representative

Comments: _____

ASSESSING DEPARTMENT

Approved **Denied** _____ Date _____

Signature of Assessor or Authorized Representative

Comments: _____

Date Assessor Submitted to County: _____

Addresses Issued: _____



**LAND SPLIT
Application**

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

(For DTE Energy to fill in)

Work Order _____

Date Received _____

Return Address:

DTE Energy, Mt. Clemens Service Center
Service Planning – Right of Way Department
43230 Elizabeth, Clinton Twp., MI 48036

Contact Person: La Donna Jackson (586) 783-1978

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. # 03- _____

City/Township/Village: _____ FRASER _____

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.

For this Application to be processed the information listed below must be provided:

- a) Proof of Ownership (Deed or Land Contract – Title insurance policy acceptable, not title commitment)
- 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: _____