

CITY OF EASTPOINTE ASSESSING DEPARTMENT
23200 Gratiot • Eastpointe, MI 48021 • 586-445-3661 ext. 7

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 Eastpointe 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 Alley Vacation

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
- 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 Eastpointe Ordinances, Chapter 22-LAND DIVISIONS AND SUBDIVISIONS and Chapter 50-ZONING 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-sized paper and PDF, if requested.
- Application fee included: Yes No
*Residential Split, Combination or Boundary Adjustment: \$150
Commercial Split, Combination or Boundary Adjustment: \$200
Alley Vacation: \$250 plus Attorney & Consultant Fees
(A refundable deposit is required to be escrowed for Attorney and Consultant Fees not to exceed \$2,000)*

*****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: _____