AS OF: 16 October 2025

Date request received:_____ Date Official Request Begins:_____
(NOTE: The 45 days for Butler Township to return an answer to this request does not officially begin until the owner has satisfactorily met all the items indicated on this form)

BUTLER TOWNSHIP

REQUEST BY OWNER (Name) Buyer's Name:
TO SPLIT PROPERTY: (Address) Address:
Phone: Phone:

OWNER'S SIGNATURE:_____ DATE:_____
(PRINTED NAME)

PARENT PARCEL NUMBER: 12-040 - _____ - _____ - _____ - _____

Is there a Home/Bldgs on Parent Parcel? Y or N Who will retain the home?_____

Who will retain buildings?_____

(Applicant do not write below this line) ***Applicant do not write below this line)*** ***(Applicant do not write below this line)***

STEP #1

SEND ALL SPLIT REQUESTS TO: John Dean VanDyke, 268 Willowbrook Rd Coldwater, MI 49036 Phone #: 517-414-6656

1 – Is this request made by the **OWNER? YES** or **NO (circle one)** If NO, the request is **DENIED**
2 – Has the **OWNER** provided a reasonable sketch of the existing property and does the sketch also show the requested **SPLIT** with all the dimensions clearly indicated for each of the property lines? **YES** or **NO (**circle one)
3 – Tax Certification submitted with application? **YES or NO** (circle one)
4 – Proof of Mortgage Release? **YES or NO or N/A**
5 – Property has been reviewed for PA116**? YES or NO or N/A**
6 – Is property enrolled in Qualified Ag shall remain Qualified Ag – PA260 exemption? **YES or NO or N/A**
If yes, is it going to remain Agricultural? _____

If NO, describe what the owner(s) needs to provide the Zoning Coordinator before the Assessor can review this request for a split:
-
-
-

DOES OWNER'S REQUEST MEET WITH ALL LOCAL ZONING REQUIREMENTS? YES or NO (circle one)

Signed:_____ Date:_____
John Dean VanDyke, Township Zoning Administrator

STEP # 2

REVIEW OF SPLIT REQUEST BY ASSESSOR FOR COMPLIANCE WITH THE 1 APRIL 1997 LANDS DIVISION ACT

1 - Did owner supply the **PARENT PARCEL ID # Yes** or **NO** (circle one)
2 - Did owner include a complete legal description for both the parent and child parcel? **YES** or **NO** (circle one)
3 - Did owner provide a legible sketch of the parent parcel? **YES** or **NO** (circle one)
4 - Does the sketch show the requested split (child) parcel with all property lines clearly marked with the requested dimensions? **YES** or **NO** (circle one)
5 - Does the requested split meet all the requirements of 1997 LANDS DIVISION ACT? **YES** or **NO** (circle one)

Signed:_____Date:_____
Assessor: Erica Ewers, 1048 Campbell Rd, Quincy, MI 49082 Phone: (517) 639-9074

This request is: **APPROVED DISAPPROVED**
(If Approved, Assessor will distribute copies) If DISAPPROVED, List reason(s) & Return to Owner:
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-

Cy to: **__Planning Chairman __Twp Assessor-Original __Land Resource Center __Property Owner**
__Twp Supervisor