



Land Division Application Form
 City of Monroe
 Planning Department
 120 E. First Street
 Monroe, MI 48161
 734.243.0700 (P) 734.384.9108 (F)

Receipt Stamp

 Application #

Owner Information

Name: _____
 Address: _____
 Telephone: _____ Fax: _____ Email: _____

Applicant Information

Name: _____
 Address: _____
 Telephone: _____ Fax: _____ Email: _____

Property Description

Property Address: _____
 Located between _____ and _____ Streets.
 Property ID #: _____ Existing Zoning: _____

Required Information

A survey drawn by a professional Surveyor, Architect or Engineer that includes the following information:

- Depicting the proposed parcels, their dimensions and area;
- Indicating the placement of all buildings, setbacks and easements; and
- Provide a legal description for each resulting parcel.

Submittal Procedure

- Applicant submits a complete application with all required information;
- Planning Department staff will verify completeness;
- Application will be placed on the next available Citizens Planning Commission (CPC) agenda;
- A public hearing will be held at the CPC meeting;
- The CPC will make a recommendation to the City Council; and
- If final approval is obtained by the City Council, the City Assessor will finalize the land division for the tax roll.



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Authorization

I/We hereby request in accordance with City Ordinances for the regulation and control of the subdivision of the land in the City of Monroe, that the City approve the Request for a Lot Split and place the property(s) on the assessment and tax roll.

The information, plans and materials submitted herewith in support of this application are to the best of my/our knowledge, true and correct.

In addition, I/We understand that this application will be placed on the next available Citizens Planning Commission regular meeting agenda, unless I/We request a special meeting to be held for an additional cost.

Owner _____ **Date** _____

Applicant _____ **Date** _____

Fees

Land Division \$500.00

To request a Special Meeting before the CPC please submit the Special Meeting Application with the \$400 fee.

Department Use Only

Fee Paid \$ _____

Authorization of Completeness

Planning Department Staff