



**CITY OF WARREN  
PLANNING COMMISSION**

JAMES R. FOUTS, MAYOR  
ONE CITY SQUARE, STE. 315  
WARREN, MICHIGAN 48093-5283

PHONE: (586) 574-4687 FAX: (586) 574-4645  
CONTACT PLANNING DEPARTMENT

# LOT SPLIT AND COMBINATION APPLICATION

<input type="checkbox"/> Subdivision Lot Split	<b>\$500.00</b>
<input type="checkbox"/> Re-establish Subdivision Plat Line	<b>\$500.00</b>
<input type="checkbox"/> Acreage Parcel Split	<b>\$500.00</b>
<input type="checkbox"/> Lot Combinations	<b>\$350.00</b>
(Application Effective 9-13-21) (Fees Effective 8-10-21)	

PLEASE TYPE OR PRINT  
DESCRIPTION OF REQUEST: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARCEL P.I.N.: 12-13-  
(Attach and additional sheet if more address and parcel numbers)

**LEGAL OWNER**  
(If different than  
**(PRINT)**

Name/Company	Phone	Email or Fax
Address		City/State/Zip

**PROFESSIONAL:**  
(Must be licensed in  
State of Michigan)  
**(PRINT)**

Name/Company	Phone	Email or Fax
Address		CITY/STATE/ZIP

**APPLICANT:**  
**(PRINT)**

NAME/COMPANY	PHONE	Email or Fax
Address		CITY/STATE/ZIP

\_\_\_\_\_  
Signature of Legal Owner (Attached AFFIDAVIT OF OWNERSHIP must be completed) Date

\_\_\_\_\_  
Signature of Professional (Site Plan Preparer) Date

\_\_\_\_\_  
Signature of Applicant (Representative for Development) Date

1. Attach a typed legal description of the parent parcel(s) and each resultant child parcels to the completed application before it is submitted to the Planning Department.
2. Please be sure to thoroughly review the attached procedures and plan requirements. We suggest that the applicant provides a copy of the plan requirements to the licensed professional who will be preparing the required plan.
3. The Affidavit of Ownership of Land is also attached and must be completed and submitted with the Application.

# LOT SPLIT AND/OR COMBINATION CHECK OFF LIST

**As you the representative do these items, you need to check them off. We will not accept packets without all items checked and done.**

- Application shall be completely filled out, signed and dated.
- Affidavit shall be completely filled out, signed and notarized.
- If Subdivision Lot Split submit twenty (24) copies of surveys that are signed and sealed by a Professional Surveyor certified by the State of Michigan.
- If Subdivision Lot Combinations, Acreage Lot Combination, and/or Acreage Lot Split submit eight (8) copies of surveys, signed and sealed by a Professional Surveyor certified by the State of Michigan.
- The correct owner is on the application and affidavit. If it is a business or LLC we need a contact name. The owner of record must be the same for all parcels involved in a Lot Combination.
- Submit all phone numbers, fax or emails for contacts for communication purposes.
- A legal description is provided for each parcel and proposed parcel(s) on the survey and electronically in word format.
- A Site Data Chart is provided on the survey for subdivision lot splits and acreage lot splits.
- A small Location Map is provided on the survey.
- If the property has any delinquent taxes, your packet will not be accepted.**

Representative Signature \_\_\_\_\_ Date \_\_\_\_\_  
(must have signature or will not accept package)

## **Employee Only – Please Initial:**

1. Verify everything done.
2. Make copy of check.
3. Let applicant know date of Planning Commission Meeting.
4. Stamp application and at least one sheet of plan.
5. Put brief description on agenda immediately.



AFFIDAVIT OF OWNERSHIP OF LAND

I, WE \_\_\_\_\_  
Name(s) of Owner(s)

OF \_\_\_\_\_  
Address, City, State Zip Telephone Email

THE \_\_\_\_\_ OF \_\_\_\_\_  
Title of Officer Name of Company

BEING DULY SWORN, DEPOSE(S) AND SAY(S) THAT \_\_\_\_\_  
I/We/It

\_\_\_\_\_/RECORDED LAND CONTRACT PURCHASER(S) \_\_\_\_\_/RECORDED DEEDHOLDER(S)

OF LAND FOR WHICH SUBMITTAL HAS BEEN/WILL BE MADE TO THE CITY OF WARREN, MACOMB COUNTY, MICHIGAN IN A:

PETITION FOR HEARING BY THE CITY OF WARREN PLANNING COMMISSION

FURTHER, THAT \_\_\_\_\_  
Name(s) of Applicant(s)

THE \_\_\_\_\_ OF \_\_\_\_\_  
Title of Officer Name of Company

OF \_\_\_\_\_  
Address, City, State Zip Telephone

IS/ARE/MY/OUR DESIGNATED REPRESENTATIVE(S) IN THE PROCESSING OF SAID PETITION.

SIGNED \_\_\_\_\_

SIGNED \_\_\_\_\_

STATE OF MICHIGAN  
COUNTY OF \_\_\_\_\_

ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_, BEFORE ME PERSONALLY CAME  
\_\_\_\_\_, TO ME KNOWN TO BE THE INDIVIDUAL (S) NAMED IN AND WHO  
EXECUTED THE FOREGOING AFFIDAVIT, FOR THE PURPOSE AS STATED, AND ACKNOWLEDGED THAT  
\_\_\_\_\_ DID SO OF \_\_\_\_\_ OWN FREE WILL AND DEED.

\_\_\_\_\_  
NOTARY PUBLIC, \_\_\_\_\_ COUNTY, MICHIGAN  
MY COMMISSION EXPIRES: \_\_\_\_\_

NOTICE TO OWNER

**IF A REPRESENTATIVE APPEARS ON YOUR BEHALF, THE REPRESENTATIVE/APPLICANT SHALL CONTACT THE PLANNING DEPARTMENT BY LETTER OR EMAIL AND MAKE THEMSELVES KNOWN. FAILURE TO ANSWER ANY QUESTION FROM THE COMMISSION MAY RESULT IN YOUR REQUEST BEING TABLED OR DENIED. IT IS RECOMMENDED THAT YOU APPEAR IN PERSON.**



**PLANNING COMMISSION**

JAMES R. FOUTS, MAYOR  
ONE CITY SQUARE, STE. 315  
WARREN, MICHIGAN 48093-  
5283

PHONE: (586) 574-4687 FAX: (586) 574-4645

# **LOT SPLIT AND COMBINATION PROCEDURES**

**The lot split or combination application shall be valid for a period of one (1) year from the date of submission, after which time it will be automatically expired if not approved and sent to the Assessing Department within the one (1) year timeframe. An extension for a period of up to six (6) months may be granted by the Planning Director if the applicant notifies the Planning Department, in writing, at least sixty (days) prior to the expiration date.**

## **Subdivision Lot Split Procedure (Creating a new split line for a subdivision lot)**

1. Applicant(s) may schedule a meeting with Planning Staff to conduct a preliminary review of the requested subdivision lot split in order to identify issues which may arise during the review process. This preliminary meeting is not a requirement.
2. A completed application, including the affidavit of ownership, twenty-four (24) copies of the required plans and applicable fee must be submitted to the Planning Department. Requests in compliance with Zoning Ordinance requirements will be placed on a Planning Commission agenda in accordance with the schedule prepared by the Planning Staff.
3. The applicant will receive a notice informing them of the Planning Commission public hearing scheduled for their item. Attendance at the Planning Commission meeting is **mandatory**.
4. The Planning Commission will hold a public hearing and issue their recommendation regarding the request. The applicant will also receive formal correspondence from the Planning Commission secretary detailing the Planning Commission's recommendation. This recommendation is forwarded to City Council.
5. The applicant will receive a notice informing them of the City Council public hearing scheduled for their item. Attendance at the City Council meeting is **mandatory**.
6. City Council will hold a public hearing and either approve, approve with conditions or deny the request.
7. Any conditions applied to City Council's approval of the request must be completed before the City Clerk will record a certified copy of the resolution with the Macomb County Register of Deeds. **Approval of the request will be revoked if the applicant does not complete the conditions imposed by the City Council Resolution within one (1) year.**
8. If the request is approved and all of the conditions have been met, the request will be forwarded to the office of the City Clerk to be recorded at the Macomb County Register of Deeds. The Assessing Department will review the request and forward it to the Macomb County and File Department for assignment of a new parcel identification number.



**PLANNING COMMISSION**

JAMES R. FOUTS, MAYOR  
ONE CITY SQUARE, STE. 315  
WARREN, MICHIGAN 48093-5283  
PHONE: (586) 574-4687 FAX: (586) 574-4645

# **LOT SPLIT AND COMBINATION PROCEDURES**

## **Re-establishing a Subdivision Platted Lot Line**

1. Applicants may schedule a meeting with Planning Staff to conduct a preliminary review of the request in order to identify issues which may arise during the review process. This preliminary meeting is not a requirement.
2. A completed application, including the affidavit of ownership, eight (8) copies of the required plans and applicable fee must be submitted to the Planning Department.
3. Planning staff will conduct a review of the request and forward a copy to the Assessing Department and the Building Division for their review.
4. The Planning Department will administratively approve, approve with conditions or deny the request and notify the applicant of the decision no more than sixty (60) days after the submission of a complete application.
5. If the request is approved and all of the conditions have been met, the request will be forwarded to the Assessing Department will review the request and forward it to the Macomb County and File Department for assignment of a new parcel identification number.

## **Acreege Parcel Split Procedure**

1. Applicant(s) may schedule a meeting with the Planning Staff to conduct a preliminary review of the Proposal in request in order to identify issues which may arise during the review process. This Preliminary meeting is not a requirement.
2. A completed application, including the affidavit of ownership, eight (8) copies of the required plans and applicable fee must be submitted to the Planning Department.
3. Planning staff will conduct a review of the request and forward a copy to the Assessing Department and the Building Division for their review.
4. The Planning Department will administratively approve, approve with conditions or deny the request and notify the applicant of the decision no more than sixty (60) days after the submission of a complete application.
5. If the request is approved and all of the conditions have been met, the request will be forwarded to the Assessing Department will review the request and forward it to the Macomb County and File Department for assignment of a new parcel identification number.



**PLANNING COMMISSION**

JAMES R. FOUTS, MAYOR  
ONE CITY SQUARE, STE. 315  
WARREN, MICHIGAN 48093-5283  
PHONE: (586) 574-4687 FAX: (586) 574-4645

# **LOT SPLIT AND COMBINATION PROCEDURES**

## **Property Combination Procedure**

1. Applicants may schedule a meeting with Planning Staff to conduct a preliminary review of the proposal in order to identify issues which may arise during the review process. This preliminary meeting is not a requirement.
2. A completed application, including the affidavit of ownership and eight (8) copies of the required Plans must be submitted to the Planning Department.
3. Planning staff will conduct a review of the request and forward a copy to the Assessing Department and the Building Division for their review.
4. The Planning Department will administratively approve, approve with conditions or deny the request and notify the applicant of the decision no more than sixty (60) days after the submission of a complete application.
5. If the request is approved and all of the conditions have been met, the request will be forwarded to the Assessing Department will review the request and forward it to the Macomb County and File Department for assignment of a new parcel identification number.



**PLANNING COMMISSION**

JAMES R. FOUTS, MAYOR ONE  
CITY SQUARE, STE. 315  
WARREN, MICHIGAN 48093-5283  
PHONE: (586) 574-4687 FAX: (586) 574-4645

# LOT SPLIT AND COMBINATION PLAN REQUIREMENTS

The plans provided must bear the seal and signature of a professional surveyor licensed by the State of Michigan. Plans for smaller parcels may be on paper measuring a minimum of 8.5" x 14" and plans for larger parcels should be provided on a minimum 24" x 36" size paper. The City will not accept surveys with a scale smaller than 1" = 20'. All surveys provided must include the following information:

## A. Title Block

1. Project Name and Address
2. Designer Name and Address
3. Drawing Date
4. North Arrow with Drawing Scale
5. Embossed/Stamped and Signed Seal
- a. Use (both existing and proposed)
- b. Zoning district(s) and setbacks (required, existing and proposed)
- c. Site area (sq. ft. or acreage)
- d. Area of existing structure(s)
- e. Area proposed structure(s)
- f. Gross structure area
- g. Structure height
- h. Open storage area
- i. Outdoor sales area
- j. Parking requirements for use
- k. Existing parking area(s)
- l. Proposed parking area(s)
- m. International Building & Fire Code
- n. Michigan Building Code – use group
- o. Acreage of proposed earth disturbance

## B. Property Description

1. Legal Description (Match or update City records)
2. P.I.N. Number(s)
3. Property Lines, Bearings & Distance
4. Small Location Map
5. Subdivision Platted Easements(s)
6. Cross Access Easement(s)
7. Joint Parking Agreement(s)
8. Radii Encroachment Agreement(s)
9. Joint Driveway Access Easement(s)
10. Drainage Easement(s)
11. 100 and 500-year Flood Plain Boundaries
12. Acreage of proposed earth disturbance

## C. Zoning Ordinance Requirements

1. List all dimensional and use variances granted to the property
2. Provide setbacks for all structures, impermeable and permeable parking areas, storage areas, etc.– measured to property lines
3. Site Data Chart must contain the following:

## D. Structures (dimensioned)

1. Principal Structure(s)
2. Accessory Structure(s)
3. Trash Enclosure
4. Greenbelt(s), Fence(s), Wall(s), Earthen Berm(s)
5. Utility Pole(s), Fire Hydrant(s), Manhole(s)
6. Signage
7. Flood Plain Floor Elevations
8. Storage Area(s)
9. Proposed areas for storm water treatment and detention facilities (if applicable)
10. All trees having a minimum caliper of three (3) inches in diameter.
11. All existing natural vegetation features.



**PLANNING COMMISSION**

JAMES R. FOUTS, MAYOR  
ONE CITY SQUARE, STE. 315  
WARREN, MICHIGAN 48093-5283  
PHONE: (586) 574-4687 FAX: (586) 574-4645

# LOT SPLIT AND COMBINATION PLAN REQUIREMENTS

## **E. Impermeable Surface Areas (dimensioned)**

1. Parking Area(s)
2. Driveway(s) (26 ft. minimum)
3. Concrete Curbing
4. Concrete Strips
5. Bumper Curbs
6. Public/Private Sidewalk(s)
7. Roof Area (All Structures)

## **F. Parking Areas and Circulation (dimensioned)**

1. Parking Area(s)
2. Barrier-Free Parking Space(s)
3. Loading Zone(s)
4. Maneuvering Lane(s)
5. Vehicle Circulation Arrows

## **G. Abutting Properties (within 50 ft.)**

1. Zoning District(s)
2. Structure(s) and uses of close
3. Driveway(s)
4. Sidewalk(s)
5. Parking Area(s)
6. Greenbelt(s), Fence(s), Wall(s), Earthen Berm(s)

## **H. Public/Private Streets and Roads (dimensioned)**

1. Name and Class (thoroughfare, collector, residential)
2. Defined Centerline
3. Existing and Planned Right-of Ways
4. Public Alley(s), Walkway(s), etc.



