



CITY OF ST. JOSEPH
PLANNING & ZONING DEPARTMENT
700 Broad Street
St. Joseph, MI 49085
Phone (269)983-1212
Fax (269) 985-0347
www.sjcity.com

**Boundary Adjustment, Lot Consolidation and Land Division
Variance Process, Instructions and Application***

Contact City Staff to discuss request



Make Application - must be complete and fees paid



Request scheduled for action before City Commission



City Commission reviews application and takes action on request



If approved request forwarded to Berrien County Land Division/GIS Department. Applicant records within 60 days

*See attached detailed directions for all steps involved.



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Boundary Adjustment, Lot Consolidation and Land Division

Variance Process, Instructions and Application

1. **Application for Boundary Adjustment, Lot Consolidation and Land Division has been recently submitted and the Community Development Director has sent letter of denial.** Within Chapter 27 – Subdivisions of the Code of Ordinances, Section A-24. – Appeal from Zoning Administrator’s Determination and Section A-25. – Variance provides the process and standards for requests that are denied.
2. **Submission of Application.** Complete applications may be submitted within twenty (20) days of receiving written denial letter from Zoning Administrator/Community Development Director.
 - a. It is suggested that you make an appointment with staff to submit the application.
 - b. All required applications, supplemental information and fees must be submitted at one time.
3. **Acceptance of Application.** Staff reviews the application and supplemental information for completeness.
4. **Scheduling of Request before City Commission.**
 - a. Staff prepares a written notice which includes the date, time and location of the City Commission meeting when the variance request will be heard. This notice is mailed to the persons adjacent to the property to be divided and shall be sent to the persons as they appear on the assessment roll ***no less than 15 days prior*** to the scheduled meeting date.
 - b. Staff prepares memorandum for Commission packet which includes explanation of request and applications and supplemental documents.
5. **City Commission Meeting.** The applicant makes a presentation to the City Commission regarding the proposed variance application. The City Commission has four options:
 - i. Motion to approve the request as presented;
 - ii. Motion to approve the request with conditions;
 - iii. Motion to deny the request;
 - iv. Motion to continue the item to a future meeting to obtain additional information.
6. **If approved, staff forwards approval to the Berrien County Land Division/GIS Department.**
7. **Recording of Approvals.** Applicant records approved plans within 60 days of City approval.



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BOUNDARY ADJUSTMENT, LOT CONSOLIDATION
AND LAND DIVISION VARIANCE APPLICATION

Please print legibly. All portions must be completed. Do not leave any section blank, use N/A. Incomplete forms will be returned. If additional space is needed, please use additional sheets of paper.

Property Information

Property Address(es): _____

Property Code Number(s) (Tax Number): 11-76-_____

Briefly Explain Request: _____

Applicant Information

In case of trust, provide the name, address and telephone numbers of all trustees and beneficiaries of the trust. An LLC or corporation must provide a copy of Articles of Incorporation. In case the applicant is not the property owner, written permission from the property owner is required.

Name of Applicant: _____

Relationship to Property Owner: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Emergency Number: _____

E-mail Address: _____

Name of Property Owner: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

Attorney: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

Land Surveyor and/or Engineer: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

Type of Request

_____ Boundary Adjustment (transferring land between two adjacent parcels – no decrease or increase in number of parcels)

_____ Combination (combining two or more parcels to create one parcel)

_____ Land Division (dividing one parcel into two or more parcels).

Total number of existing parcels? _____

Total number of proposed parcels? _____

Variance Information

List all variances necessary for the proposed request and include applicable code sections.

In accordance with Section A-25. – Variances, the questions need to be answered.

Explain how strict application of the regulations would result in practical difficulties or undue hardship.

Explain how relief from the strict application would not result in a substantial detriment to the public good and does not impair the intent and purpose of Chapter 27 Subdivisions.

Explain how the variance(s) being requested are the minimum necessary to relieve the practical difficulty or undue hardship. _____

**BOUNDARY ADJUSTMENT, LOT CONSOLIDATION AND LAND DIVISION VARIANCE
APPLICATION
CERTIFICATION**

The Applicant certifies and acknowledges and agrees that:

- A. The statements contained in this application are true and correct to the best of the Applicant's knowledge and belief. The owner of the subject property, if different from the applicant, states that they consent to the filing of the application and that all information contained is true and correct to the best of their knowledge;
- B. The Applicant understands that an incomplete or nonconforming application will not be considered. In addition, the Applicant understands that the City may require additional information prior to the consideration of this application;
- C. The Applicant shall make the property that is subject of this application available for inspection by the City at reasonable times;
- D. If any information provided in this application changes or becomes incomplete or inapplicable for any reason following submission of this application, the Applicant shall submit a supplemental application or other acceptable written statement containing the new or corrected information as soon as practicable but not less than twenty (20) days following the change, and that failure to do so shall be grounds for denial of the application;
- E. The Applicant understands that if the application is approved with conditions, those conditions will need to be met as part of any permit issued; and
- F. The Applicant understands this is only a parcel division which conveys certain rights under the applicable local land division ordinance and the State Land Division Act (formerly the subdivision control act P.A. 288 of 1967, as amended (particularly by PA. 591 of 1996), MCL 560.101 et.Seq.) and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restrictions or other property rights.
- G. The Applicant understands that if the division is approved, a land division does not occur until receipt of a registerable conveyance is supplied to the City of St. Joseph.
- H. The Applicant understands if zoning, local ordinances and State Acts change prior to land divisions being completed (registerable conveyances) the divisions must comply with the new requirements unless surveys representing the approval of the divisions are recorded with the Berrien County Land Division/GIS Department.
- I. The Applicant understands that if the application is approved it is valid for sixty (60) days from the date of issuance and if the proposed Boundary Adjustment, Lot Consolidation or Land Division are not completed during the sixty (60) day time frame, a new application and approval must be obtained.

(page 1 of 2)

BOUNDARY ADJUSTMENT, LOT CONSOLIDATION AND LAND DIVISION VARIANCE APPLICATION

CERTIFICATION, continued (page 2 of 2)

The Applicant certifies and acknowledges and agrees that:

- J. The Applicant understands that they are responsible for all application fees. Fees are non-refundable and there is no guarantee the application will be approved or permits issued. There should be no outstanding monies owed to the City (i.e., water bill or taxes).

On the _____, day of _____, 20_____, I/We have read the above certification, understand it, and agree to abide by its conditions.

Signature of Applicant or Authorized Agent

Name of Applicant or Authorized Agent

SUBSCRIBED AND SWORN

To before me this _____ day of _____, 20_____

Notary Public

OFFICIAL CITY USE: Date Received: _____ Fee: _____
Completed: Variance Application: _____

BOUNDARY ADJUSTMENT, LOT CONSOLIDATION AND LAND DIVISION VARIANCE APPLICATION

OWNER'S CONSENT FORM

I/We, the Owner(s) of the property listed below, hereby grant permission for the Applicant,

(Company name and contact person) to seek _____
(state request that can be made) as required by the City of St. Joseph, Michigan for the property commonly known as _____ (street address) and having the Property Code Number (Tax Number) of 11-76-_____.

On the _____, day of _____, 20_____, I/We have read the above certification, understand it, and agree to abide by its conditions.

Signature of Property Owner

Name of Property Owner

Signature of Property Owner

Name of Property Owner

SUBSCRIBED AND SWORN

To before me this _____ day of _____, 20_____

Notary Public