

Official Use Only

Permit No: _____ ZA Review Date: _____ PC Appr/Deny Date: _____

Date Recvd: _____ ZA Aprv/Deny Date: _____ ZBA Aprv/Deny Date: _____

Denial Reason: _____ Issued Date: _____

APPLICATION FOR CSDA PERMIT

Application Notes:

- 1) To construct a project within the designated Critical Sand Dune Area (CSDA) located on the Beaver Island Archipelago of Charlevoix County, this CSDA permit must be completed and approved prior to starting any construction.
- 2) This permit is good for one year from the approval date; a second year may be approved if reasonable progress is made on the project.

1. Project Location Information

Project Address: 37835 WHITE BIRCH ROAD		
County: CHARLEVOIX	Zip Code: 49782	Township: ST JAMES
Property Tax Identification Number: 15-013-702-140-00		
Name of Nearest Intersection and Direction from Project: Donegal Bay Rd/white Birch Rd - heading south off of Donegal Bay Rd		
Subdivision Plat and Lot Number: Port St James No. 2, Lot 140		
Date Lot was Recorded: November 9, 1967		

Street addresses (not a requirement for this permit application) and date lot was recorded are obtained from the Charlevoix County Equalization Department at:

www.equalization@charlevoixcounty.org

2. Applicant and Agent Information

If an agent completes this application, it is understood that the Owner has given this permission to do so.

Owner/Applicant: James and Leslie Visser		
Mailing Address: 2591 87TH ST		
City: BYRON CENTER	State: MI	Zip Code: 49315
Contact Phone Number: 616-438-4124		
E-Mail Address: jvisser@yahoo.com		
Agent/Contractor: Leslie Visser		
Mailing Address: See above		

City:	State:	Zip Code:
Contact Phone Number:		
E-Mail Address:		

Check if Yes: <input checked="" type="checkbox"/>	Check if No:	Is the applicant (incl spouse) the sole owner of all project property? If no, attach letter(s) of authorization from all property owners.
Check if Yes: <input checked="" type="checkbox"/>	Check if No:	Is property part of an Association? If yes, name of Association: PORT OF ST JAMES ASSOCIATION
Check if Yes:	Check if No: <input checked="" type="checkbox"/>	Have you obtained all permits required from this Association? APPLICATION SUBMITTED (SEE ATTACHED APPLICATION)

The Port of St James Association is a residential subdivision. It is NOT the same entity as St James Township.

3. Project Description

If the proposed project property is within 500' of a Lake or Stream, report:

Inland Lake/Stream Name: NA	Lake Michigan (yes/no): NO
---------------------------------------	--------------------------------------

Check applicable proposed use:	Residential <input checked="" type="checkbox"/>	Multi-Family	Commercial:
Public/Govt:	If other, what type?		

Date Property Corners and Project Corners are staked:	END OF SUMMER 2023
Estimated month/year of project start:	SUMMER 2024
Estimated month/year of project completion:	SUMMER 2025

Summary of all proposed activities (Attach a separate statement if more room is needed):

Excavation and construction of a new 23'x44' home on a crawl space foundation. No deck, garage, or other out building. A new driveway, well, and septic will be included. One tree will be planted in the front yard. Power and telephone will be added if a future deck is requested, 2 new CSDA permits is required before this deck can be built.

4. Property Information

Size of Parcel (Acres): 0.3	Size of area being impacted (Sq ft): 4,220 SFT
Height of proposed structures (List separate heights for each structure): 22 ft	
Does any portion of the construction area have slopes that are greater than 25% (or 1-foot vertical rise over 4-foot horizontal plane) – yes or no: NO	

Does any portion of the construction area have slopes that are greater than 33% (or 1-foot vertical rise over 3-foot horizontal plane) – yes or no:

Provide Proof of Ownership:

Attach a copy of a Notice of Assessment or the Charlevoix County Parcel Information which is found at: https://www.charlevoixcounty.org/online_services/

5. Site Plan

The project Site Plan is to be developed as indicated within the directions. The Site Plan is to be attached to this application.

6. Permits that are required to be included with this Application

Type of Permit (If Applicable)	Source of Information	Approved (Y/N)	ID Number	Letter, if deemed not applicable
Part 91 Soil Erosion and Sedimentation Control	Charlevoix County Dept of Building Safety, Soil Erosion Officer. https://www.charlevoixcounty.org	NA		Yes/No: WAIVER
Threatened & Endangered Species	Terrestrial Invasive Species Administrator at: invasivespadm.bi@gmail.com or 231-330-0422	Y	SEE ATTACHED VAP - NO T&E	Yes/No: NO T&E
Septic System	https://www.nwhealth.org	Y	C23065	NA
Driveway/Road Permit	https://www.charlevoixroads.org	Y	D23007	NA
Well Permit	https://www.nwhealth.org	Y	C23-065	NA

The below permits are NOT required to be included with this Application but are required by other entities. These contacts are provided for information only. The building permit needs to be posted at the site.

Building Permit	Charlevoix County Dept of Building Safety https://www.charlevoixcounty.org	NA	NA	NA
Association	https://theportofstjamesassociation.org or another association as needed	NA	NA	NA

7. Vegetative Assurance Plan

A Vegetative Assurance Plan must be attached and is required to address:

- Cutting and removal of trees and other vegetation – in accordance with the current version of the Forest Management Guidelines for Michigan.
- A review of Threatened and Endangered Species and attached applicable state and/or federal permits or letters stating permits are not required. The owner/agent is responsible to pay for these permit fees directly to the issuing agency.
- A review of Terrestrial Invasive Species (TIS) and attached report describing the findings and treatment plan.

Note: The Beaver Island TIS Administrator is available, for a fee payable to the applicable township, to assist the property owner/agent in creating this plan and connecting the owner/agent with the applicable state/federal authorities. The TIS Administrator must perform the T&E and TIS Reviews. Contact the TIS Administrator at invasivespadm.bi@gmail.com or 231-330-0422.

APPLICANT AUTHORIZATION

I hereby authorize the State of Michigan, County, and/or Township Officials to inspect the site of this project. Further, I certify that the information provided in this application is true and accurate.

Applicant's Signature: Leslie R. Visser

Print Name: LESLIE VISSER	Address: 2591 87TH St	
City: BYRON CENTER	State: MI	Zip Code: 49315
Phone number where you can be contacted during the day: 616-438-4124		

RETURN APPLICATION/ATTACHMENTS, ALONG WITH FEE PAYMENT(S) TO THE APPLICABLE TOWNSHIP, TO:

Zoning Administrator, via zoningadmin.bi@gmail.com, or P.O. Box 85, Beaver Island, MI 49782.

If you have questions regarding this permit, contact the Zoning Administrator at:

- 231-448-2000 or 231-448-2830 (an alternative office), or
- Via office hours or by appointment

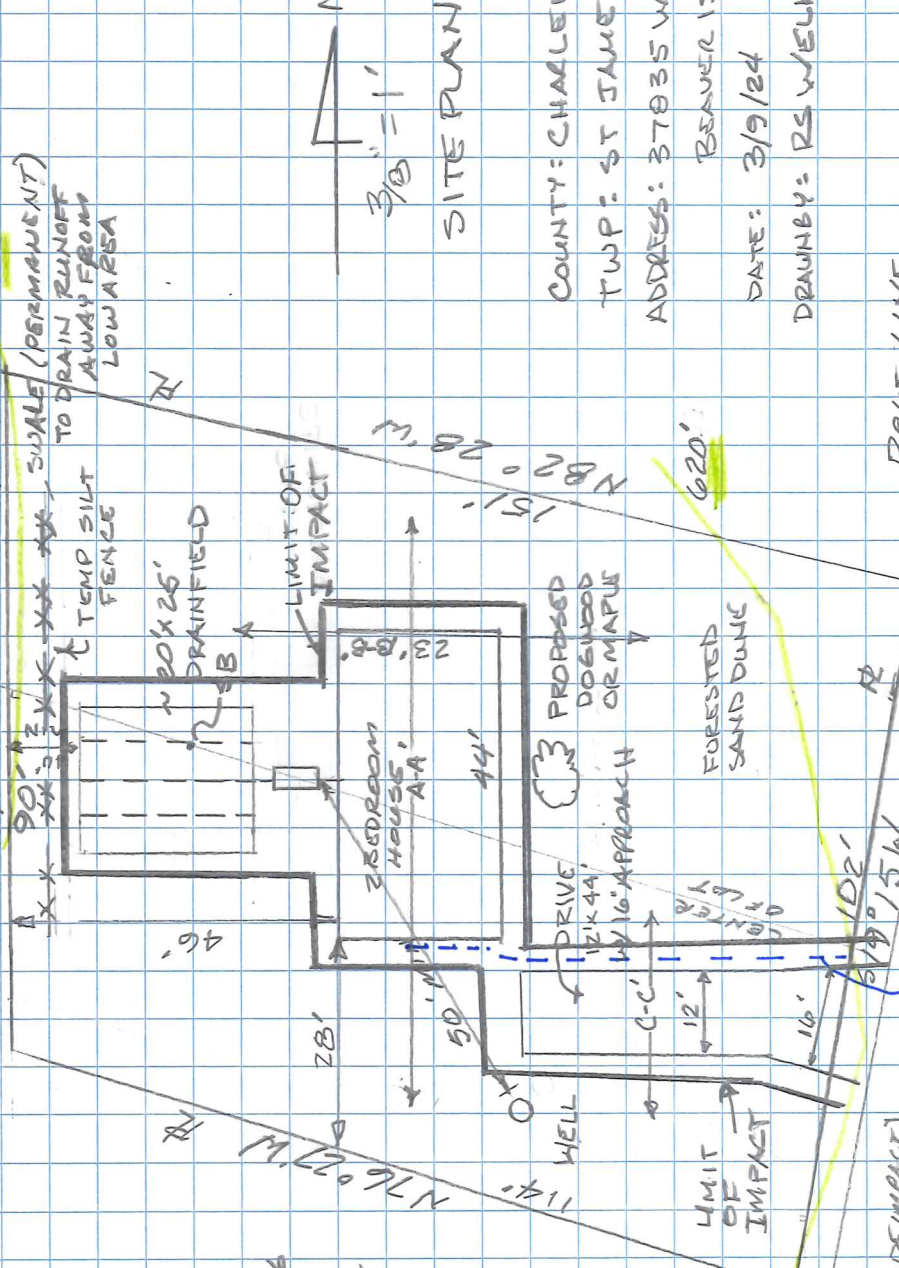
Official use only: (Same check, payable to the applicable township may be used for any combination of these fees)

Application Fee Amount	\$500	Check No:
Vegetation Assurance Plan (VAP) Fee Amount (if requested)	\$250	Check No:
VAP by others; but T&E/TIS review Fee Amount	\$150	Check No:

LOW AREA

610' SWALE (PERMANENT) TO DRAIN RUNOFF AWAY FROM LOW AREA

N 30° 01' W



TREE PLAN

- REMOVE DEAD/DYING WHITE BIRCH TREES
- MOSTLY W/L IMPACT AREA

□ REFER TO DETAILED PLAN ON SHEET 2

SITE PLAN

COUNTY: CHARLEVOIX
TWP: ST JAMES
ADDRESS: 37035 WHITE BIRCH
BEAVER ISLAND, MI
DATE: 3/9/24
DRAWING: RS WELKE

IMPACT AREA: (ASSUMES 5' WIDE IMPACT)

DRIVE: $(26' \times 10') + (22' \times 44') = 1,228 \text{ sft}$

HOUSE: $(54' \times 33') = 1,782 \text{ sft}$

SEPTIC: $(30' \times 35') + (10' \times 16') = 1,210 \text{ sft}$

TOTAL: $4,220 \text{ sft} = 0.1 \text{ ACRE}$

ROW LINE

EDGE OF ROAD

BURIED TELEPHONE AERIAL POWER LINE
(THIS MAY BE LOCATED TO THE LEFT OF THE DRIVE WITHIN THE PLANNED LIMIT OF IMPACT.)

WHITE BIRCH ROAD

606' ROW

TREE MANAGEMENT PLAN

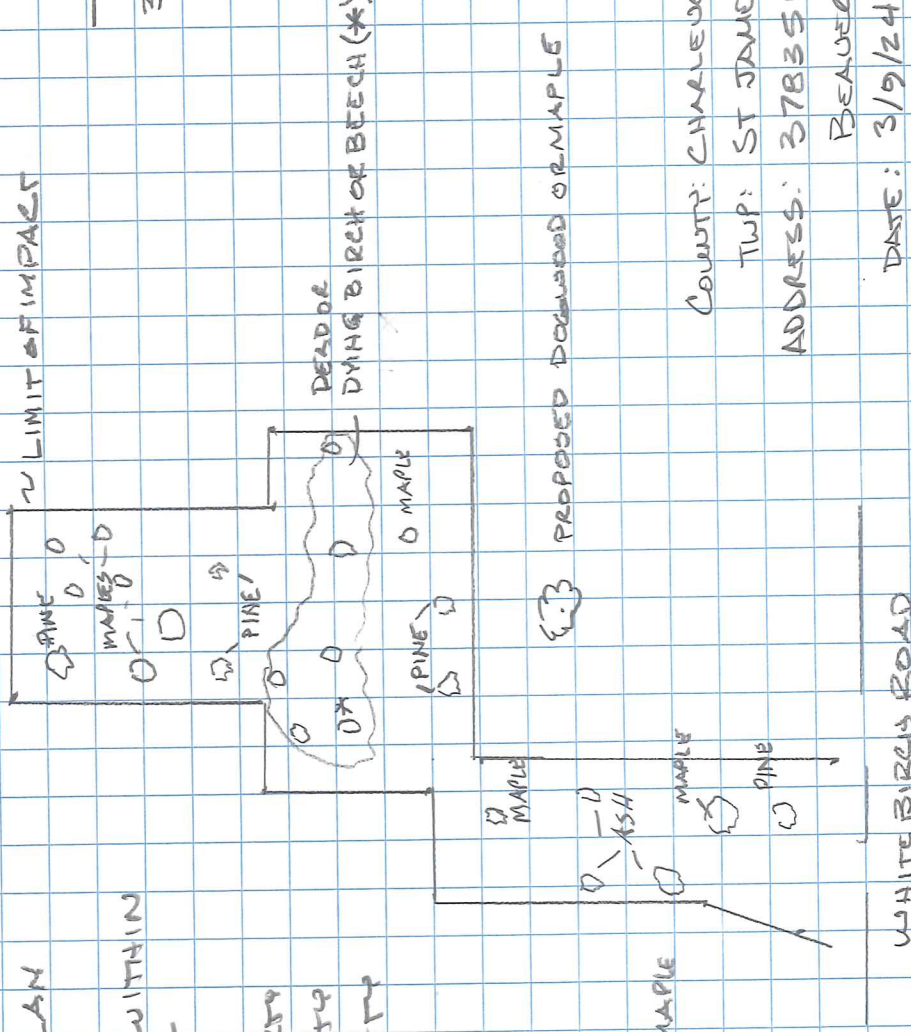
REMOVE THE TREES WITHIN
THE LIMIT OF IMPACT

THE REMAINING PROPERTY
HAD SIMILAR DENSITY
OF TREES AND VARIETY
NO REPLACEMENT IS
REQUIRED

PINE TREE = BALSAM FIR

MAPLE TREE = RED MAPLE OR SUGAR MAPLE

ASH = GREEN ASH



COUNTY: CHARLEVOIX

TWP: ST JAMES

ADDRESS: 37835 WHITE BIRCH RD

BEAVER ISLAND, MI

DATE: 3/9/24

DRAWN BY: R SWEENEY

SECTION A-A'

COUNTY: CHARLEVOIX

TWP: ST JAMES

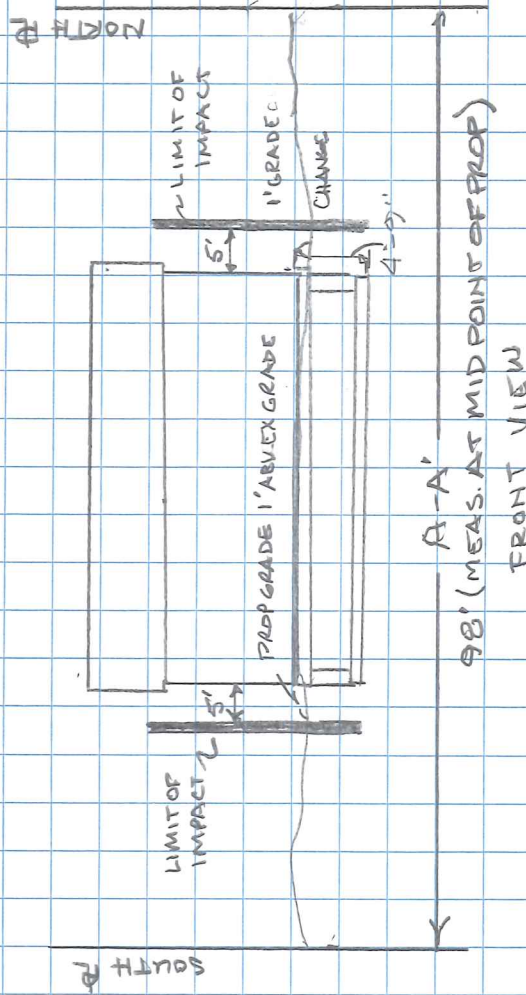
ADDRESS: 37835 WHITE BIRCH RD

BEAVER ISLAND, MI

DATE: 3/9/24

DRAWN BY: RSWELKE

$\frac{1}{2}" = 1'$



SHEET 3/5

SECTION B-B'

COUNTY: CHARLEVOIX

TWP: ST JAMES

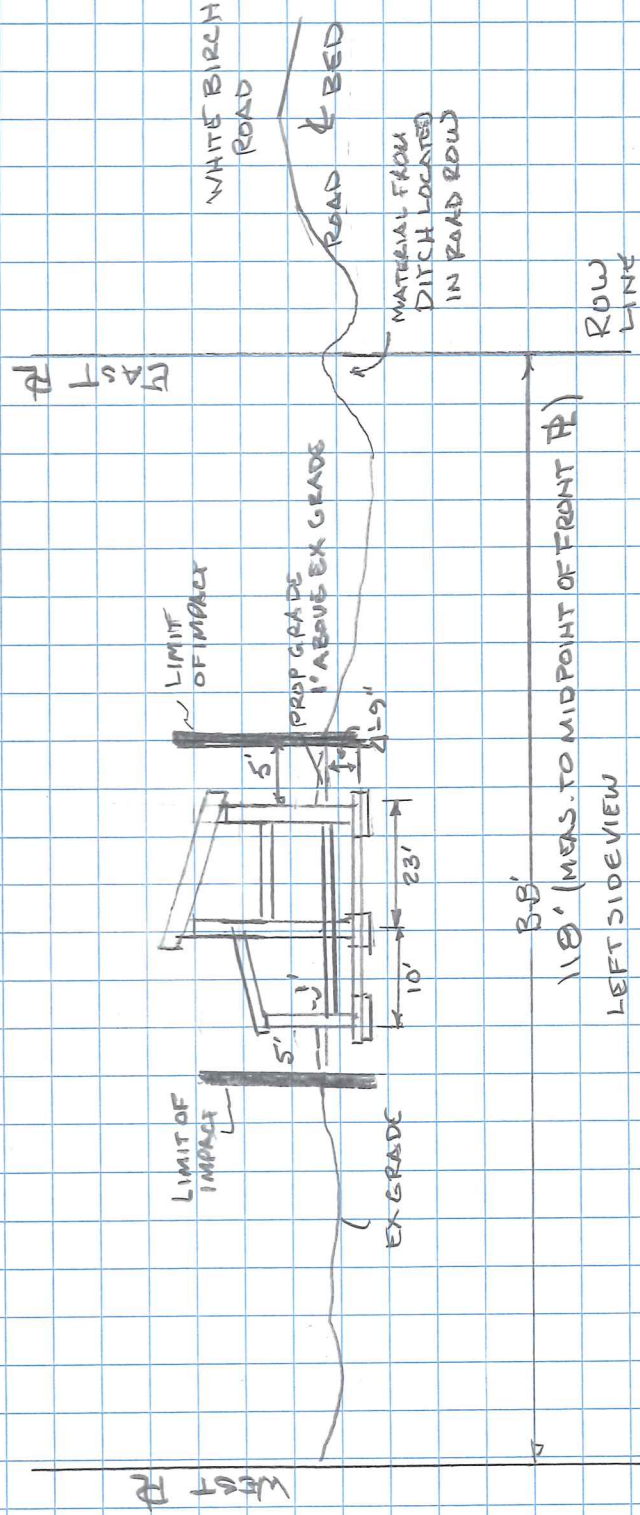
ADDRESS: 37835 WHITE BIRCH RD

BEAVER ISLAND, MI

DATE: 3/9/24

DRAWN BY: RSWELKE

1/2" = 1'



3/16" = 1'

SECTION C-C'

COUNTY: CHARLEVOIX

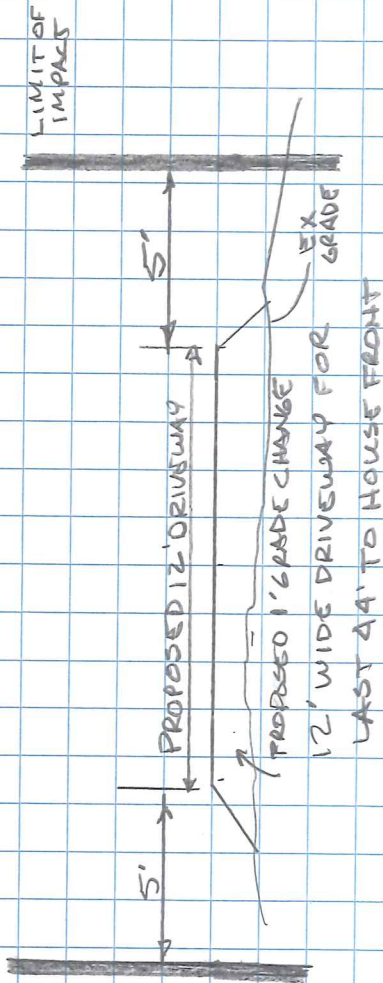
TWP: ST JAMES

ADDRESS: 37835 WHITE BIRCH RD

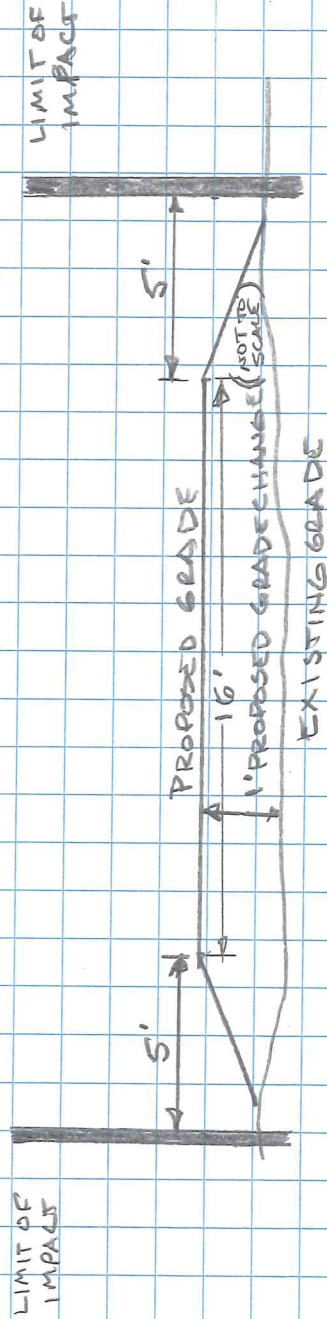
BENEFICIAL MI LIMIT OF IMPACT

DATE: 3/9/24

DRAWN BY: R. S. WELKE



SECTION C-C'



**VEGETATION ASSURANCE PLAN FOR A NEW RESIDENCE
37835 WHITE BIRCH RD, ST JAMES TOWNSHIP,
BEAVER ISLAND, CHARLEVOIX COUNTY
FEBRUARY 27, 2024**

The property owner is to note the expected actions which are marked in italics.

Property: Tax ID Number 013-702-140-00; This 0.3-acre property is located at 37835 White Birch Road, between Donegal Bay Road and Stephen Ct. This property is part of the Port of St. James Association area. The property was recorded on November 9, 1967.

The township required TIS Plan is embedded within this Vegetation Assurance Plan; therefore, a separate TIS report will not be forthcoming.

This site was not subject to the EGLE permit review in September 2022 or audit report dated May 8, 2023. However, the owner submitted a CSDA application in April 2023 which the St James Township Planning Commission reviewed and rejected on May 2, 2023, due to the lack of information and accommodating attachments. Subsequently, the township indicated to the owner that they needed to wait for the new CSDA program to be established before a new permit application would be considered. This revamped program was established on September 1, 2023.

Project site description: This property is situated ~1,500-ft from Lake Michigan. The property is located on the west and north portion of Beaver Island.

The property is fairly level with a slight rise along the north side, material disposal of the ditch constructed within the road right-of-way. The property consists of forested dunes with a wetland system located adjacent to/beyond the west/rear property line. The new house is being placed within the areas of dying/dead white birch trees and one beech tree. The 0.3-acre site contains the following plant species observed on May 16, 2023 and November 4, 2023:

Invasive species

N/A

Threatened/endangered species

N/A

Native species

Balsam fir (*Abies balsamea*)

Paper birch (*Betula papyrifera*)

Red Maple (*Acer rubrum*)

Sugar Maple (*Acer saccharum*)

Starry false Solomon's seal (*Maianthemum stellatum*)

Round-lobed Hepatica (*Hepatica americana*)

Red Raspberry (*Rubus idaeus*)
Common Milkweed (*Asclepias syriaca*)
Canada Mayflower (*Maianthemum canadense*)
Poison-ivy (*Toxicodendron radicans*)
Wild Sarsaparilla (*Aralia nudicaulis*)

Proposed development: The owners plan to build on this vacant property a new home, with a driveway, septic system, and well. The home will be 23' (east to west – parallel to the south property line) and 44' (south to north).

Special considerations: Drainage from this property could affect a wetland system to the west and north of the westmost property line. This wetland system drains to the north, crosses under Donegal Bay Rd and continues to the west along a road ditch to Lake Michigan. To protect this wetland system, the township is requiring a mitigation plan as follows:

During construction, the contractor/home owner must maintain a silt fence east of and near the west property line to protect the existing wetland system. The final grade of this property must include a drainage course (natural swale or ditch) to interrupt and contain the flow of any surface water that would otherwise flow to the west.

The property is substantially tree covered, therefore, there is no requirement to replace any removed trees. For additional information, refer to the tree management plan within the site plan package.

Propose actions for maintaining site stability during and after construction:

Proposed revegetation of the site: *Restoration will include natural succession and native plantings within the disturbed areas if necessary, and/or management of any invasive species that establish during or after construction.*

The property owners will become aware and work with the TIS Program and others in their two-year obligation to monitor the new growth and replace any native plants that do not survive around the disturbed area(s).

Other concerns: Within this wetland system discussed under "Special considerations" are native plant species such as Jack-in-the-Pulpit (*Arisaema triphyllum*) and Eastern Skunk Cabbage (*Symplocarpus foetidus*) but also the invasive Narrowleaf Cattail (*Typha angustifolia*).

Another concern is the number of dead or dying White Birch trees that should be noted for safety concerns. More than likely these trees are at a successional age they are naturally dying but diseases/infections may be possible and could be tested to determine if a disease or infection is present. *These trees should be removed.*

This report was prepared by R.S. Welke, Supervisor of St James Township, with vegetation reporting from the Beaver Island TIS Administrator, Ms. Shelby Harris.



Charlevoix County Equalization Department

301 State St, Charlevoix, MI 49720
231-547-7230 Fax: 231-547-7232
equalization@charlevoixcounty.org

Permanent Address Number Assignment

Prepared by: Tom Sheneman

Date: 3/31/2023

Charlevoix County reserves the right to change your permanent address number if you do not accurately indicate the location of your driveway along the road. This number is assigned to you in accordance with the Charlevoix County Uniform Numbering Ordinance, as amended. You are required to reference this address number when establishing service with utility service companies.

Address Assigned

Number: 37835 Street: White Birch Rd Type: Rd Directional: _____
Township: St James Property Tax ID Number: 15-013-702-140-00
Road Type: ☒ Public ☐ Private
Zip codes and City names used for mailing and/or non-emergency response purposes are determined by USPS. The following information is tentative and should be confirmed with the local USPS office:
City: Beaver Island Zip Code: 49782

Property Owner's Information:

Name: James Robert & Robin Leslie
Mailing Address: 2591 87th St
City/State/Zip: Byron Center MI 49315
Phone Number: 616-438-4124

Applicant's Information:

Name: Robin Leslie
Phone Number: 616-438-4124
Email: jravisser@yahoo.com

Type of Structure:

- ☒ New house
☐ New utility service

- ☐ New garage/pole building
☐ Other: _____

Documents Provided:

- ☐ A final site plan or survey drawing indicating the position of your driveway and showing the approximate distance from your new driveway to the nearest road intersection or neighboring driveways.
Notes: _____
☐ A copy of the official Township resolution approving your new road name
☐ A properly posted road name sign if your address is the first number addressed on the new road or easement access.

Posting your permanent address number:

Your permanent address number must be displayed with the top of address number sign set five feet above the roadway grade. White reflective numbers must be displayed on a green background. The sign must be posted before a building, plumbing, mechanical, or electrical permit inspection can be performed or certificate of occupancy can be issued in accordance with the County's Uniform Numbering Ordinance.

Additional Notes: Driveway entrance towards the south property line

For Internal Use Only

Entered: ☒ MSAG ☐ GIS ☒ Tax Map ☒ BS&A
Sent to: ☒ Clerk ☐ INdigital ☒ USPS ☒ Assessor

Driveway Permit

14482193

CHARLEVOIX CO RD -BI

CHARLEVOIX CO RD -BI

PAGE 01/02

10-20-16 04 20 2023

1.7.0

CHARLEVOIX COUNTY
ROAD COMMISSION
1251 Boyne Avenue
Boyne City, MI 49712
231.582.7330

County Use Only	
Permit No.	<u>D23002</u>
Issue Date	<u>4/20/23</u>
Permit Fee	<u>\$25.00</u>
Bond No.	_____
Amount	_____

APPLICATION AND PERMIT

To construct, operate, maintain, use and/or remove within a county road right-of-way
If applicant hires a contractor to perform the work, BOTH must complete this form and BOTH assume responsibility for the
provisions of this Application and Permit.

APPLICANT		CONTRACTOR	
NAME	<u>James Visser</u>	NAME	<u>James Visser</u>
ADDRESS	<u>2591 87th street</u>	ADDRESS	_____
CITY/STATE/ZIP	<u>Byron Center/MI/49315</u>	CITY/STATE/ZIP	_____
TELEPHONE NO.	<u>(616)438-4124</u>	TELEPHONE NO.	<u>()</u>
Applicant's Signature	<u>[Signature]</u>	Contractor's Signature	_____
Title	_____	Title	_____
Date	<u>4/19/2023</u>	Date	_____
FINANCIAL REQUIREMENTS		ATTACHMENTS REQUIRED	
Application Fee	\$ _____	Plans and Specs	_____
Permit Fee	\$ <u>25.00</u>	Bond	_____
Est. Inspec. Fee	\$ _____	Proof of Insurance	_____
Bond	\$ _____	Yes _____ No _____	
Other	\$ _____	P.L. \$ _____ P.D. \$ _____	
To Be Billed	\$ _____	Other _____	
Receipt Number	<u>CC</u>		
Dated	<u>4/20/23</u>		

APPLICATION

Applicant and/or Contractor request a permit for the purpose indicated herein and/or in attached plans and specifications at the
following location:

37835 White Birch Road

Street Names

Section 15-013-702-140-00 Township St James White Birch approx 224 S of Donegal Bay

Enter street name and distance from nearest intersection or house

for a period beginning _____ and ending _____ and agrees to the terms of the permit. It is
understood that all activity resulting from the granting of this permit is to be in accordance with all Specifications and Conditions
referred to or included hereon and any Attachments for Additional Requirements. It is further understood that in the event any facility
covered under this Permit interferes with any future use of right-of-way for highway purposes, the Permit Holder, at his/her expense,
will move or remove the facility at the direction of the Road Commission.

General Description and Nature of Request

DRIVEWAY

Use: ☐ Commercial ☒ Residential 16 width Surface: ☐ Bituminous ☐ Concrete ☒ Gravel

CULVERT

Use: ☐ Drive ☐ Cross Type: ☐ Concrete ☐ Metal ☐ Plastic Size: _____ Dia _____ Length NO CULVERT

UTILITY

☐ Water ☐ Gas ☐ Power ☐ Sanitary Sewer ☐ Telephone ☐ Cablevision
Length _____ Size _____ Distance from Centerline _____

MISCELLANEOUS

(Specify) Requesting permit for a driveway at 37835 White Birch Rd, Beaver Island for a new build. This will be a natural driveway with no asphalt or concrete. It will be on the south side of the parcel (left side when facing the parcel from the road). The property is the third parcel off the intersection of White Birch and Donagel Bay Rd.

PERMIT

A permit is granted in accordance with the foregoing application for the period stated above, subject to the following terms agreed to by the Permit Holder. When Applicant hires a Contractor the "Permit Holder" is the Applicant and Contractor.

Remarks: No Culvert required. Due to the location of this proposed driveway being the low point along the road, water may run down this driveway off from White Birch Rd.

CHARLEVOIX COUNTY ROAD COMMISSION

Approved by [Signature]
Signature Authorized Representative

Approved
[Signature]
4/20/23

April 20, 2023
Date

Staff Engineer
Title

Additional Requirements

1. **SPECIFICATIONS.** All work performed under this permit must be done in accordance with the plans, specifications, maps and statements filed with the Commission and must comply with the Commission's current requirements and specifications on file at its office and M.D.O.T. specifications.
2. **FEES AND COSTS.** Permit Holder shall be responsible for and pay all fees established by the Commission in connection with the applications for an issuance of this permit.
3. **BOND.** Permit Holder shall provide a cash deposit, letter of credit or bond in a form and amount acceptable to the Commission at the time permit is issued, if in the sole judgement of the Commission such security is necessary before work commences.
4. **INSURANCE.** Permit Holder shall furnish proof of liability and property damage insurance in the amount stated on this permit naming the Commission as an insured. Such insurance shall cover a period not less than the term of this permit and shall provide that it cannot be cancelled without ten (10) days advance notice by certified mail with return receipt required to the Commission.
5. **INDEMNIFICATION.** Permit Holder shall hold harmless and indemnify and keep indemnified the Commission, its officers and employees from all claims, suits and judgments to which the Commission, its officers, or employees may be subject and for all costs and actual attorney fees which may be incurred on account of injury to persons or damage to property, including property of the Commission, whether due to the negligence of the Permit Holder or the joint negligence of the Permit Holder and the Commission, whether due to the negligence of the Permit Holder or the joint negligence of the Permit Holder and the Commission, arising out of the work under this permit, or in connection with work not authorized by this permit, or resulting from failure to comply with the terms of this permit, or arising out of the continued existence of the work product which is the subject of this permit.

Permit Holder shall also hold harmless and indemnify and keep indemnified the Commission, its officers and employees from all claims, suits and judgments to which the Commission, its officers or employees may be subject and for all costs and actual attorney fees which may be incurred on account of any claim which is made or brought for damage to trees or other natural vegetation arising out of the work under this permit or in connection with work not authorized by this permit, or resulting from failure to comply with the terms of this permit, or arising out of the continued existence of the work product which is the subject of this permit.

Permit Holder shall also hold harmless and indemnify and keep indemnified the Commission, its officers and employees from all claims, suits and judgments to which the Commission, its officers or employees may be subject and for all costs and actual attorney fees which may be incurred on account of any litigation brought concerning the nature, extent or existence of the highway right-of-way in which the work under this permit is being performed.

6. **MISS DIG.** The Permit Holder must comply with the requirements of Act 53 of Public Acts of 1974, as amended. **CALL MISS DIG AT (800) 482-7171 AT LEAST TWO (2) FULL WORKING DAYS, BUT NOT MORE THAN TWENTY-ONE (21) CALENDAR DAYS, BEFORE YOU START WORK.** Permit Holders assumes all responsibility for damage to or interruption of underground facilities.
7. **NOTIFICATION OF START AND COMPLETION OF WORK.** Permit Holder must notify the Commission at least 48 hours before starting work and must notify the Commission when work is completed.
8. **TIME RESTRICTIONS.** All work shall be performed Mondays through Fridays between 8:00 AM and 5:00 PM, unless written approval is obtained from the Commission, and work shall be performed only during the period set forth in this permit.
9. **SAFETY.** Permit Holder agrees to work under this permit in a safe manner and to keep the area affected by this permit in a safe condition until the work is completed. All work site conditions shall comply with Michigan Manual of Uniform Traffic Control Devices.
10. **RESTORATION AND REPAIR OF ROAD.** Permit Holder agrees to restore the road and right-of-way to a condition equal to or better than its condition before the work began; and to repair any damage to the road right-of-way which is the result of or related to the work performed under this permit, whenever it occurs or appears.
11. **LIMITATION OF PERMIT.** The permit does not relieve Permit Holder from meeting other applicable laws and regulations of other agencies. Permit Holder is responsible for obtaining additional permits or releases which may be required in connection with this work from other governmental agencies, public utilities, corporations and individuals, including property owners.
12. **PERMISSION/TITLE ISSUES FOR UNDERLYING AND ADJACENT LANDS.** This permit only indicates the Commissions consent to the specified activity within the County Road Right-of-Way. It does not grant or convey to the Permit Holder any land title rights to any underlying or adjacent lands. Furthermore, it does not grant or imply any permission that may be necessary for activity on adjacent lands. The Permit Holder is solely responsible for resolving any applicable permission or land title concerns with third parties concerning underlying and adjacent lands.
13. **REVOCATION OF PERMIT.** The permit may be suspended or revoked at will, and the Permit Holder shall surrender this permit and alter, relocate or remove its facilities at its expense at the request of the Commission.
14. **VIOLATION OF PERMIT.** This permit shall become immediately null and void if Permit Holder violates the terms of this permit, and the Commission may require immediate removal of Permit Holder's facilities, or the Commission may remove them without notice at Permit Holder's expense.
15. **ASSIGNABILITY.** This permit may not be assigned without the prior approval of the Commission. If approval is granted, the assignor shall remain liable and the assignee shall be bound by all terms of this permit.
16. This permit is subject to any supplemental specifications which may be on file with the Commission and is further subject to any relevant Michigan statutes including but not limited to MCL 224.19b and MCL 247.321 et seq.

2020 MAY -8 AM 9:00

RECEIVED FOR RECORD
STATE OF MICHIGAN, COUNTY OF CHARLEVOIX
SHIRLEY M. COBLENTZ, REGISTER OF DEEDS

05/08/2020 12:30:08 PM PAGES: 2

THE UNIVERSITY OF CHICAGO

**QUIT CLAIM
DIRECT SALE DEED**

MICHIGAN DEPARTMENT OF NATURAL RESOURCES

ISSUED UNDER AICI 407, FUNDING ACT OF 1984, AS AMENDED

THIS DEED, made this 27th day of February, 2020 BY AND BETWEEN, the DEPARTMENT OF NATURAL RESOURCES for the STATE OF MICHIGAN, by authority of the Natural Resources and Environmental Protection Act, Act 451, P.A. of 1994, as amended, hereafter called "Grantor", and

James Robert Visser And Leslie Robin Visser, As Tenants by the Entirety (A Married Couple)
2591 87th Street
Byron Center, MI 49315

hereafter called "Grantee".

WITNESS, that under the authority of Act 451, P.A. of 1994, the Director of the Department of Natural Resources authorized the sale of the land to Grantee in consideration of THREE THOUSAND SIX HUNDRED SEVEN and 00/100 DOLLARS (\$3,607.00). The Grantor, acting for and in behalf of the State of Michigan under and by authority of Act 451, P.A. of 1994, hereby grants, conveys, releases and quit-claims unto the Grantee and to Grantee's heirs, successors, and assigns, all the right, title and interest acquired by the State of Michigan in and to the following described land located in the County of Charlevoix, State of Michigan:

Township of SAINT JAMES
Port St. James No. 2

DNR Parcel ID
000125

SUBJECT TO any and all rights-of-way, encumbrances, restrictions, and/or easements of record or otherwise.

The grantor grants to the grantee the right to make zero (0) division(s) under Sec. 108 of the Land Division Act, Act 288, Public Acts of 1967.

SAVING AND EXCEPTING OUT OF THIS CONVEYANCE and always reserving unto the said State of Michigan, all mineral, coal, oil and gas, lying and being on, within or under the said lands hereby conveyed, except sand, gravel, clay or other nonmetallic minerals with full and free liberty and power to the said State of Michigan, its duly authorized officers and assigns, and its or their lessees, agents and workmen, and all other persons by its or their authority, or permission, whether already given or hereafter to be given at any time and from time to time to enter upon said lands and take all usual, necessary or convenient means for exploring, mining, working, digging, getting, laying up, storing, dressing, making merchandise and taking away the same or parts thereof and gas existing said gravel, clay or other materials, minerals and also saving and reserving to the State of Michigan, its duly authorized officers and assigns, and its or their lessees, agents and workmen, and all other persons by its or their authority, or permission, whether already given or hereafter to be given at any time and from time to time to enter upon said lands and take all usual, necessary or convenient means for exploring, mining, working, digging, getting, laying up, storing, dressing, making merchandise and taking away the same or parts thereof.

NOTICE: The Department of Natural Resources by authority of its Director has caused this instrument to be recorded in the State of Michigan by its Real Estate Services Manager on the 17th day of February, 2002.

DEPARTMENT OF NATURAL RESOURCES
STATE OF MICHIGAN

Scott D. Goeman, Manager, Real Estate Services

STATE OF MICHIGAN }
COUNTY OF _____ }

The following instrument was submitted to the Department of Natural Resources for recording on the 17th day of February, 2002, and was recorded in the State of Michigan by its Real Estate Services Manager on the 17th day of February, 2002.

State of Michigan
U. S. Department of Natural Resources

Prepared by:
Michael Michalek
DNR Real Estate Services
P.O. Box 30448
Lansing, Michigan 48909-7948

After Recording Return to:
Grantee

APPLICATION FOR PSJA BUILDING PERMIT

PRIOR TO BEGINNING ANY CONSTRUCTION PROJECT WITHIN PSJA, YOU MUST SUBMIT THIS APPLICATION AND HAVE IT APPROVED BY THE BOARD OF PSJA. UPON APPROVAL, YOU WILL BE ISSUED A PSJA BUILDING PERMIT; WHICH IS A SEPARATE DOCUMENT FROM THE TOWNSHIP ZONING PERMIT.

APPLICATIONS WILL BE ACTED UPON WITHIN 30 DAYS OF SUBMISSION.
IN ORDER TO OBTAIN A PSJA BUILDING PERMIT THIS APPLICATION MUST BE COMPLETED AND SUBMITTED TO:

PSJA
P. O. Box 289
BEAVER ISLAND, MICHIGAN 49782
ATTN: ARCHITECTURAL COMMITTEE

DO NOT USE THIS SPACE

DATE RECEIVED: _____

COMPLETE: YES _____ NO: _____

DATE TO ARCH. COMM.: _____

APPROVED: _____ BY: _____

NOT APPROVED: _____ BY: _____

NOTICE OF ACTION SENT:

DATE: _____

BY: _____

THE APPLICATION MUST BE ACCOMPANIED BY COPIES OF BY ALL RELEVANT DRAWINGS AND PLANS FOR THE PROJECT.

OWNER: James & Leslie Visser

OWNER ADDRESS: 2591 87th Street
Byron Center, MI 49315

OWNER PHONE: 616-438-4124

PSJA LOT NUMBER AND ADDRESS: PSJA No 2 Lot 140

DESCRIPTION OF PROJECT: 1012 sq foot house

ESTIMATED DATE OF PROJECT START AND COMPLETION: Summer 24 - Summer 25

GENERAL CONTRACTOR ON PROJECT: James Visser

GENERAL CONTRACTOR ADDRESS: _____

OWNER SIGNATURE: James Leslie Visser DATE: 2/25/24

THE PSJA BUILDING PERMIT IS NOT A REPLACEMENT FOR THE TOWNSHIP ZONING PERMIT. YOU MUST STILL OBTAIN A TOWNSHIP ZONING PERMIT PRIOR TO BEGINNING ANY CONSTRUCTION IN THE ASSOCIATION. BOTH PERMITS ARE REQUIRED FOR ANY CONSTRUCTION.



HEALTH DEPARTMENT

of Northwest Michigan

Well Approval Information and Water Sample Voucher

Address:	37835 White Birch Rd	Permit Number:	C23-065
County:	Charlevoix	Permit Type:	Septic and Well Permit
Township:	St. James	Section:	Permit Issued: May 26, 2023
Tax ID #:	15-013-702-140-00		

The Michigan Department of Environmental Quality (MDEQ) has established a well approval process for newly constructed private water well. There are three elements that must be satisfied in order for a newly installed well to be considered approved:

1. **Approval of the water well record and abandonment log (if applicable).** All well and abandonment records when received from the well driller are reviewed by the Health Department for approval.
2. **Safe Water Samples.** As part of the well permit service, you are entitled to one Bacteriological and one Partial Chemical test through the Northern Michigan Regional Laboratory. Request forms, sample bottles, and mailing containers are available at any of our branch offices. *Samples must be to the lab within 30 hours of collection - ask about our free sample shipment program. **Please bring this voucher when picking up your sample bottles.**
3. **An Approved Final Inspection.** Health Departments are only required to conduct final inspections on 10% of permitted wells annually. If you would like to arrange for a final inspection of your well, contact our department **after** well completion.
4. For additional information regarding water wells, visit our website at www.nwhealth.org under Permits and Licenses and New Well or you can call any of our branch offices to have literature sent directly to your home address.

Antrim Office
209 Portage Drive
Bellaire, MI 49659
231-533-8670

Charlevoix Office
220 West Garfield
Charlevoix, MI 49720
231-547-6523

Emmet Office
3434 Harbor-Petoskey Road
Harbor Springs, MI 49740
231-347-6014

Otsego Office
95 Livingston Blvd
Gaylord, MI 49735
989-732-1794



HEALTH DEPARTMENT *of Northwest Michigan*

Health Department of Northwest Michigan Charlevoix
220 West Garfield
Charlevoix, MI 49720
(231) 547-6523

Permit Issued To:
James Visser
2591 87th St
Byron Center, MI 49315
(616) 438-4124

Permitted Location:			
Address:	37835 White Birch Rd	Permit Number:	C23-065
County:	Charlevoix	Permit Type:	Septic and Well Permit
Township:	St. James	Section:	
Subdivision:	Port St. James	Lot:	140
Tax ID #:	15-013-702-140-00	Permit Issued For:	Conventional System
		Replacement or Repair:	No
		Residential/Non-Residential:	Residential

Design Criteria			
Number of Bedrooms:	2	Soil Classification:	S (Sand)
Gallons Per Day:	250	Seasonal High Water Table:	>74 inches

System Design Specifications							
Septic Tank		Gallons 1000	Proposed changes to permit must be approved prior to installation. Call our office at the number listed above if you have any questions regarding this permit.				
Design Type	Absorption Area	Size of Pipe	Number of Laterals	Length of Drained	Width of Drained	Max. Depth of Bed Bottom	Pipe Spacing
Drained	500 Sq. Ft.	4"	5	25 Feet	20 Feet	26"	4 Feet

Permit Requirements/Conditions:

1. Isolate all portions of the system a minimum of 50' from all water well(s).
8. Contractor responsible for maintaining 10' from all property lines with any portion of the wastewater system.
10. Replacement drainfield area is identified directly NORTH of initial drainfield location. Drainfield replacement area should remain in a natural, undisturbed state, free of buildings, driveways, trees, etc.
18. Remove any trees in drainfield area to avoid root intrusion. Strongly recommend 15'-20' perimeter around new drainfield.

ALL WELL PERMIT CONDITIONS

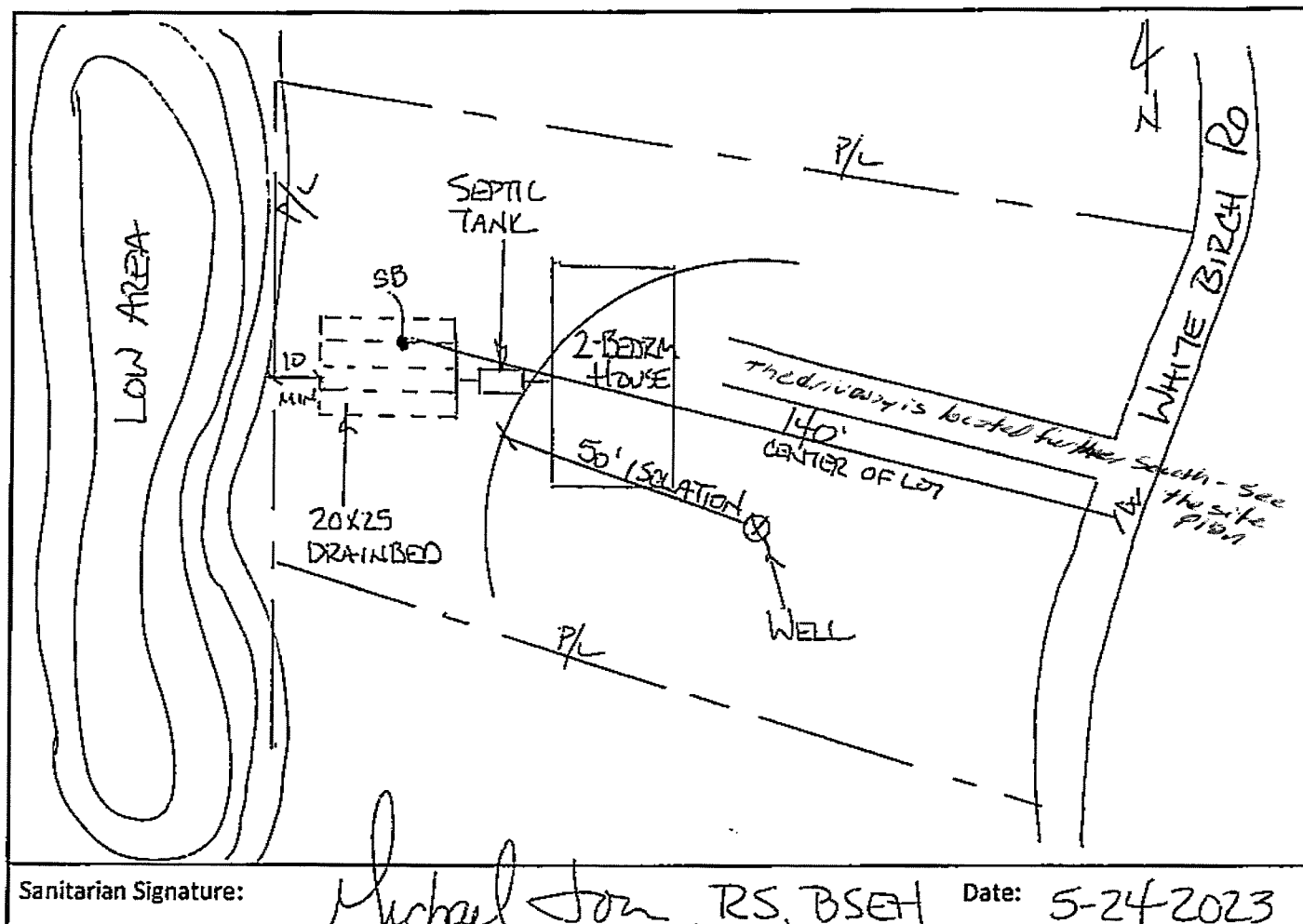
1. Owner responsible to obtain a safe bacteriological water sample prior to use. Sample bottles available at health department offices.
2. Well driller is required to submit a well record to the owner and the health department within 60 days of well completion.
3. Isolate the new well a minimum of 50' from any potential sources of contamination, including all portions of the septic system.
6. If an artesian flow is encountered the flow shall be contained within the permanent well casing as required. No flow shall be allowed outside the casing without written deviation approval from this agency.

Issued by: Michael Jones, RS BSEH
EH Supervisor/Sanitarian

Date Issued: May 26, 2023
Permit Expires 2 years from date issued.

Site Plan Drawing Attached or on Reverse Side

Share your experience with us by visiting www.nwhealth.org and completing a client satisfaction survey.



TH – Test Hole, ST – Septic Tank, PC – Pump Chamber, DF – Drainfield, BM – Benchmark, P/L – Property Line, FM – Forcemain

BENCHMARK LOCATION: NA

RELATIVE ELEVATION:

BENCHMARK ELEVATION:

ft.

BOTTOM OF STONE ELEVATION:

ft.

FINAL INSPECTIONS AND APPROVALS (Section 4-15): "...The owner or owner's agent shall notify the Health Officer when the wastewater system is installed and the project is ready for inspection. Notification must be provided a minimum of TWO (2) WORKING DAYS prior to anticipated system completion and desired final inspection by the Health Officer..."

BEFORE calling for final inspection: Make sure, at a minimum, the following that apply are COMPLETED:

- Septic tank, baffle, filters, solid outlet piping (sch40/SDR35), pump chamber and risers installed
- Riser lids comply with 59 pound weight standard (ASTM 1227 70-C).
- Pump installation is complete and ready for inspection
- Pump chamber is full of water and ready for pressure test, if applicable
- Alarm and floats are functional and energized
- All drainfield materials are installed and ready for inspection
- Filter Fabric is placed over stone

Fees may be charged for incomplete installations that require follow-up inspections for system Approval