

**Perquimans County, North Carolina**

**APPLICATION FOR GIFT OF PROPERTY**



This section to be completed by County:		
Date Received: _____	Received by: _____	Date Completed: _____
Confirmed by: _____	Subject Property Tax Map No.: _____	
Proposed number of lots: _____. Is residual parcel over 10 acres? _____. If no, remind applicant to request ARHS's preliminary approval of residual lot when applying for septic tank permit for proposed lot(s).		

Name of Boundary Survey: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_; Work: \_\_\_\_\_; Cell: \_\_\_\_\_; Fax: \_\_\_\_\_

I (We) hereby certify that I (we) am (are) the owner(s) of the property located at \_\_\_\_\_ . I (We) hereby request a Deed of Gift Subdivision at this location. I

(we) acknowledge that this Application is for a single lot to my (our) child or grandchild.

Furthermore, I (we) acknowledge that this is the one and only such gift in Perquimans County given to

this child or grandchild from me (us) during the last ten (10) year period and that the resultant lot is

equal to or exceeds the standards of the County as shown in the Subdivision Regulations and that

restrictions are placed pursuant to Section 601(e) of the Perquimans County Subdivision Regulations

in the Deed of Gift to the child or grandchild. As the owner(s) of the property, I (we) request approval

of the proposed Deed of Gift and related Boundary Survey.

Respectfully yours,

\_\_\_\_\_  
Signature of Owner/Grantor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner/Grantor

\_\_\_\_\_  
Date

Sworn to and subscribed before me, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Notary Public \_\_\_\_\_ County of \_\_\_\_\_,

State of \_\_\_\_\_

My commission expires: \_\_\_\_\_

Form revised 11-9-12

**Perquimans County, North Carolina**

**APPLICATION FOR GIFT OF PROPERTY  
CHECKLIST OF INFORMATION AND ITEMS NEEDED PRIOR TO  
APPROVAL & RECORDATION OF BOUNDARY SURVEY:**

To confirm compliance with Section 701(e) of the Perquimans County Subdivision Regulations, complete and return pages 1 and 2 of this Application for Gift of Property, and provide additional information, as follows:

\_\_\_\_\_ Page 1 of Application.

\_\_\_\_\_ Copy of proposed Deed of Gift.

\_\_\_\_\_ Boundary Survey with Certification Statements and references to residual parcel, if any (see Note #1, below).

\_\_\_\_\_ Water Availability: \_\_\_\_\_.

\_\_\_\_\_ Proposed sewage system: \_\_\_\_\_ (attach ARHS's septic system approval (and Preliminary Approval for residual parcel, if applicable) or letter of availability for public sewer as applicable).

\_\_\_\_\_ My (our) ownership of parent tract is evidenced by attached deed recorded in Real Estate Book \_\_\_\_\_, Page \_\_\_\_\_ OR Will File Number \_\_\_\_\_.

\_\_\_\_\_ My (our) parent tract is known as Township No. \_\_\_\_\_, Map/Development No. \_\_\_\_\_, Parcel No. \_\_\_\_\_.

\_\_\_\_\_ Size of Parent Tract: \_\_\_\_\_ acres.

\_\_\_\_\_ Linear footage width (street frontage): \_\_\_\_\_ and depth: \_\_\_\_\_ of parent tract.

\_\_\_\_\_ Depth of parent tract: \_\_\_\_\_ linear feet.

\_\_\_\_\_ Parent tract is zoned: \_\_\_\_\_. Future Land Use classification: \_\_\_\_\_.

\_\_\_\_\_ Review and consultation with Soil & Water Conservation staff \_\_\_\_\_.

\_\_\_\_\_ May need to establish drainage easements on the property lines depending upon Drainage plan requirements.

\_\_\_\_\_ Disclosure statement referencing Section 402(11)f), (19) and (20) of the Perquimans County Subdivision Regulations regarding grading, drainage and erosion control.

\_\_\_\_\_ Other (specify): \_\_\_\_\_.

\_\_\_\_\_ Other (specify): \_\_\_\_\_.

**NOTES:**

(1) Any lot of less than 10 acres, including any residual parcel, must obtain a certificate from the Albemarle Regional Health Service stating whether or not septic systems may be approved for the lot(s); and (2) There is no fee for this Application.

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**Section 701 Definition of a Subdivision**

All divisions of a tract of land into two or more lots, building sites, or other divisions for the purpose of sale or building development (whether immediate or future) and shall include all divisions of land involving the dedication of a new street or a change in existing streets; provided, however, that the following shall not be included within this definition nor be subject to the regulations prescribed by this ordinance:

- a) The combination or re-combination of portions of previously platted lots where the total number of lots is not increased and the resultant lots are equal to or exceed the standards of the County as shown by the regulations prescribed by this ordinance.
- b) The division of land into parcels greater than ten (10) acres where no street right-of-way dedication is involved.
- c) The public acquisition by purchase of strips of land for the widening or opening of streets.
- d) The division of a tract in single ownership whose entire area is no greater than two acres into not more than three lots, where no street right-of-way dedication is involved, and where the resultant lots are equal to or exceed the standards of the County, as shown by the subdivision regulations contained in this ordinance.
- e) The gift by a property owner of a single lot to his or her child or grandchild or to each of his or her children or grandchildren where no new road is involved, provided that only one such gift per child or grandchild be made during a ten year period and where the resultant lot is equal to or exceeds the standards of the County as shown in these subdivision regulations and provided that the following restrictions are placed in the Deed of Gift to the child or grandchild:

“But this conveyance is made subject to the following restrictions which shall run with the land:

That prior to the sale or transfer of the aforesaid lot and right-of-way to anyone other than the Grantors or either of them or to a child or grandchild of the Grantors, the aforesaid lot shall be brought into compliance with the Subdivision Regulations of Perquimans County in effect at the time of the recording of the present Deed of Gift, including, but not limited to, regulations that require the construction of a paved access road to the lot and the installation of required utilities. However, these restrictions will not apply to any transfer made to secure a loan or to any sale or transfer of the property as part of a foreclosure proceeding or to any subsequent sale or transfer by a Mortgagee who or which has purchased the property at a foreclosure sale.”

The burden shall be on any conveyer of land to provide proof why their conveyance does not constitute a subdivision. This proof must be presented to the Subdivision Review Officer.

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**Section 308 Certificates to be Applied to Face of Plat**

A) Certificate of Ownership and Dedication

I (We) hereby certify that I am (we are) the owner(s) of the property shown and described hereon which was conveyed to me (us) by deed recorded in Book \_\_\_\_, Page \_\_\_\_, and that I (we) hereby adopt this plan of subdivision with my (our) free consent and establish the minimum building lines. Further, I (we) certify that the land as shown hereon is within the subdivision regulations jurisdiction of the County Board of Commissioners of Perquimans County.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner/Corporate Seal

\_\_\_\_\_  
Owner/Corporate Seal

C) Certificate of Approval of Sewage System (optional – discuss with Planning staff)

This subdivision, entitled \_\_\_\_\_, has been designed for the construction of individual sewage systems and meets the criteria and requirements of the Albemarle Regional Health Services (ARHS) based on existing conditions and regulations. The ARHS reserves the right to require additional improvements to these properties and to limit the number of bedrooms and size of structure based on site conditions upon issuance of the final site improvements permits. This certification does not constitute a warranty and is issued based on this subdivision being serviced by \_\_\_\_\_ Water System.

(Individual/Public)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Albemarle Regional Health Services Director  
or Authorized Representative

I) Certificate of Subdivision Review Officer

I hereby certify that the subdivision plat shown hereon has been found to comply with the Subdivision Regulations of Perquimans County.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Perquimans County Subdivision Review Officer