

PERSONAL INFORMATION REQUEST FORM

**City of Swartz Creek
8083 Civic Drive
Swartz Creek, MI 48473
810-635-4464**

Date: ____/____/____

Parcel Number: _____ Property Address: _____

Requested by: _____

Taxable Value: _____ Assessed Value: _____

Year Built: _____ Square Footage: _____ Lot Size: _____

Legal Description: _____

Homestead %: _____

Summer Taxes \$ _____ Paid: _____

Winter Taxes \$ _____ Paid: _____

Special Assessments: _____

1. \$ _____ Year: _____

2. \$ _____ Year: _____

3. \$ _____ Year: _____

Water/Sewer Information: _____ Account Number: _____

*Water Balance: _____ Paid To: _____

Sewer Balance: _____ Paid To: _____

*Water is based on consumption and a final bill should be requested for closing. This City needs one (1) week notice for a final reading.

Prepared By: _____