

APPLICATION FOR LAND COMBINATION

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

Date: _____ File No: _____

Fee Paid: _____ ***Fee of \$150.00/Add \$5 for each parcel*

Applicant Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Signature of Applicant: _____ Date: _____

* * *

Property Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Signature of Property Owner: _____ Date: _____

Parcel(s) of Land to be Combined:

Address One: _____

Parcel ID No.: _____ Zoning: _____

* * *

Address Two: _____

Parcel ID No.: _____ Zoning: _____

* * *

Address Three: _____

Parcel ID No.: _____ Zoning: _____

* * *

Address Four: _____

Parcel ID No.: _____ Zoning: _____

* * *

Address Five: _____

Parcel ID No.: _____ Zoning: _____

Attached information for additional parcels.

Affidavit and permission for City Officials to enter the property for inspections:

I/We hereby agree the statements made above are true and if found not to be true this application and any approval will be void. I/We hereby request that the above listed parcel's be combined into one parcel for the upcoming tax year. The parcels are owned and occupied as one parcel.

Signature of Applicant: _____ Date: _____

Signature of Property Owner: _____ Date: _____

* * *

For Assessing Department Only

Approved: YES NO

New Parcel Number: 58- _____

Comments: _____

Signature of Assessor: _____ Date: _____