



Request to Combine Parcels

Please submit this form to the Grass Lake Charter Township Assessing Department

373 Lakeside Dr
 PO Box 216
 Grass Lake MI 49240

Application # _____
 Attachments _____

Property Owner Name _____
 Mailing Address _____
 Home Phone # _____ Cell or Work Phone # _____

The undersigned requests application to Grass Lake Charter Township to combine into one parcel, the following parcels known as:

Parcel # _____	Address _____
Parcel # _____	Address _____
Parcel # _____	Address _____
Parcel # _____	Address _____

A. A new legal description of the new parcel **must be submitted** with the Request (attach extra sheets if needed).

B. A scale drawing or survey of newly created parcel with roads/easements, existing parcels and direction of north indicated **must be submitted with** the Request

C. An application fee of \$50 per combination is required.

I also understand I will be responsible for taxes due on the individual parcels in the year this Affidavit is submitted.

Property Owner's Signature _____ Date: _____

IMPORTANT: I UNDERSTAND THAT ALL PAST, AS WELL AS CURRENT YEAR TAXES, MUST BE PAID BY DECEMBER 31ST ON ALL PARCELS IN ORDER TO HAVE THE COMBINATION PROCESSED FOR THE NEXT YEAR. IF TAXES ARE NOT PAID BY DECEMBER 31, THIS APPLICATION BECOMES VOID AND THE FEES ARE FORFEITED.

APPLICANT - DO NOT WRITE BELOW THIS LINE

Grass Lake Charter Township Clerk's Office	\$ Amount Received _____
	Receipt Date _____
	Clerk's/Receiver's Initials _____

Zoning Administrator's Review: Approved Denied

Z.A. Signature _____ Date: _____

Treasurer's Review:
 Approved, taxes are current on all parcels
 Denied, taxes are outstanding on one or more of the parcels

Treasurer Signature _____ Date: _____

Assessor's Review: Approved Denied

Assessor Signature _____ Date: _____

Once all signatures are received, please return to the Assessor. Assessor to copy for dept file, copy to Equalization and original back to Clerk's Office.