

**Land Combination Application**

**DeWitt Charter Township Assessing Department**

**1401 W. Herbison Rd. DeWitt, MI 48820 (517)669-6494**

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**1. Property Owner Information:**

|                 |
|-----------------|
| Name:           |
| Address:        |
| City/State/Zip: |
| Phone:          |

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**2. Location of Parcels to be combined**

1<sup>st</sup> Parcel

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

Parcel number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Legal description of Parcel or Lot and Subdivision (attach extra sheets if needed)

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2<sup>nd</sup> Parcel

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

Parcel number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Legal description of Parcel or Lot and Subdivision (attach extra sheets if needed)

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3<sup>rd</sup> Parcel

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

Parent parcel number: \_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_-\_\_\_\_

Legal description of Parcel or Lot and Subdivision (attach extra sheets if needed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

New Consolidated legal description:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Property Owner's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please submit completed form to the Assessing Department



Reviewer's Action

\_\_\_\_\_ Approved: Conditions, if any \_\_\_\_\_

\_\_\_\_\_ Denied: Reason \_\_\_\_\_

Signature and Date: \_\_\_\_\_

Assessor or Land Division Administrator