

CHARTER TOWNSHIP OF COMSTOCK

TOWNSHIP LAND COMBINATION APPLICATION

To The Township Assessor

Date Received by Assessor:

ALL QUESTIONS MUST BE ANSWERED AND ALL ATTACHMENTS INCLUDED FOR PROCESSING OF THIS APPLICATION.

\$ _____ APPLICATION FEE – The fee is \$25.00

PROPERTY OWNER INFORMATION:

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

*PHONE NUMBER: _____

EMAIL: _____@_____

*Where you can be reached for questions or to schedule permission for a possible site visit.

A COPY OF THIS FORM WILL BE RETURNED TO THIS ADDRESS

1. Location of parent parcel/tract(s) to be Combined:

Address: _____ Parcel ID 3907-____-____-_____

Address: _____ Parcel ID 3907-____-____-_____

Address: _____ Parcel ID 3907-____-____-_____

Address: _____ Parcel ID 3907-____-____-_____

2. Attachments: All attachments must be included for application to be processed.

Letter each attachment as shown here. Label each legal description to correspond with survey.

A. A survey or map/drawing of parent parcel/tract drawn to a scale of 1"=20', 1"=50', 1"=100', 1"=200', 1"=400', or 1"=1000'. The scale used shall best represent the property and improvements. The survey or map/drawing will include the following:

1. The labeled proposed combination(s).
2. Dimensions of the proposed combination(s).
3. Scaled location of any improvements (buildings, wells, septic systems, etc.).
4. Existing and proposed road right of ways.

All the legal descriptions for the newly combined parcels will be labeled to correspond with the survey or map/drawing.

3. Proposed Combination

_____ Combining for tax purposes only _____ Combining with a Deed

4. Affidavit and permission for Comstock Charter Township, Kalamazoo County, and State of Michigan officials to enter the property for inspections:

I agree the statements made above are true, and if found not to be true this application and any approval will be void. Further I agree to comply with the conditions and regulations provided with this Combination. I understand this is only a combination which conveys only certain rights under the applicable local ordinances, and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights.

Township combination approval in no way guarantees the issuance of a building permit. If this Combination is approved, I understand Deeds or Land Contracts representing the approved combination may be required and recorded with the Register of Deeds, or any approval will be void.

Property Owner(s) Signature

Date

Property Owner(s) Signature

Date

OFFICE USE ONLY. Please do not mark in boxes below.

New Parcel Identification Number(s): _____	
_____ Approved: Conditions, if any; _____	
_____ Denied: Reasons; _____	
_____ Signature – Township Assessor	_____ Date

<u>ZONING REVIEW:</u>	
_____ Reviewed	
Recommend Approval: _____	Recommend Denial: _____
Comments, if any _____	
_____ Signature – Zoning Administrator	_____ Date
<u>TREASURER'S REVIEW:</u>	
_____ Reviewed:	
Comments, if any _____	
TAXES CURRENT: _____ YES	_____ NO
_____ Signature - Treasurer	_____ Date