



LEONI TOWNSHIP

ASSESSING DEPARTMENT

913 Fifth St. • Michigan Center, MI 49254

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LAND COMBINATION / PROPERTY BOUNDARY CHANGE APPLICATION

All questions ***MUST*** be answered and include all necessary attachments, or this application will be returned to you. Upon completion, bring in or mail the application with payment for application fee to the Assessor's Office at the address listed above. The township will notify you of approval or denial within 45 days after receipt of a *completed* application.

Owner & Co-Owner Name(s): _____

Mailing Address: _____

Phone #: _____

Parcels to be combined are as follows:

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

- | | | | | | | |
|---|----|--------------------------|-----|----|--------------------------|----|
| A. Are parcels located in a condominium?
<i>If yes to A, does the condominium allow land combinations?</i> | A. | <input type="checkbox"/> | Yes | or | <input type="checkbox"/> | No |
| B. Are parcels in different subdivisions or in PUDS zoning? | B. | <input type="checkbox"/> | Yes | or | <input type="checkbox"/> | No |
| C. Are all parcels in the same school district? | C. | <input type="checkbox"/> | Yes | or | <input type="checkbox"/> | No |
| D. Is there an existing mortgage/land contract on any parcel?
<i>(If yes to D, please attach written approval from lender)</i> | D. | <input type="checkbox"/> | Yes | or | <input type="checkbox"/> | No |

A Non-Refundable Application Processing Fee: **\$50**

IMPORTANT:

(Initial) I (we) hereby request the combination of the property tax descriptions for the parcels indicated above into a single description. I (we) realize that the new combination will not take effect until the following tax year of the request.

(Initial) I understand it is my responsibility as the applicant to ensure all past, as well as current year's taxes, are paid by December 31st of the year in which this application is submitted on ALL parcels involved, in order to have the land combination processed for the next year. **If taxes are *not* paid by December 31st, this application becomes void, and the fees are forfeited.**

(Initial) I also understand that if there is a change in ownership, it is my responsibility as the applicant to issue and record any deeds.

Owner's Signature: _____ Date: _____

Co-Owner's Signature _____ Date: _____

*****DO NOT WRITE BELOW THIS LINE*****

Date Application Received: _____ Application Accepted By: _____

Fee Paid: Yes or No _____ Amount Received: _____ Receipt No.: _____

Current Taxes Paid: Yes or No _____ Delinquent Taxes Paid: Yes or No _____ Sewer/Water Bill Paid: Yes or No _____

Special Assessment District: Yes or No _____ School District: _____

Zoning: _____ Lender Approval Letter Attached: Yes or No _____

Parcel Combination Approved: Yes or No _____ Date Approved: _____

Reasons for Denial: _____