# Land Combination Application Otto Township in Oceana County

To combine contiguous parcels, please complete the application below. If there are any questions regarding the application, please e-mail (whiteriverassessing@gmail.com) or call (208) 317-3882 with your inquiries.

LAND COMBINATION PROPOSAL:

No. of Parcels to be combined: \_\_\_\_\_ Parent Parcel No.: 64-018-\_\_\_\_\_ Parent Parcel No.: 64-018-\_\_\_\_\_ Parent Parcel No.: 64-018-\_\_\_\_\_ Parent Parcel No.: 64-018-\_\_\_\_\_ Parcel No. (Attach additional sheets if necessary): Intended Use (Residential, Commercial, Industrial, Agricultural, etc.):

Main Parcel Address:

Legal Description of the new Parcel (Attach additional sheets if necessary):

Land Combination Requirements

#### 1. LAND COMBINATION APPLICATION:

Once this document is completed, e-mail or mail the application and the attachments listed below to:

whiteriverassessing@gmail.com (preferred) OR Julie Jackson Otto Township Assessor 3244 E Arthur Rd, Rothbury, MI 49452

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### 2. RECORD OF DEED OF CURRENT OWNERSHIP:

If lost, replacement may be obtained at the Register of Deeds at your county building.

Please include a copy with this application (only if application name not currently on the roll)

## 3. SIGNED AFFIDAVIT:

Affidavit and permission for municipal, county, and state officials to enter the property for inspection:

I hereby certify that the information contained in this application is true and understand that any application and subsequent approval based on false information will be void. Further, I agree to comply with the conditions and regulations provided with this parcel under all applicable state and local regulations. Deed and other conveyance will include statements required by Public Act 591 of 1996 as to whether the right to make further divisions is proposed to be conveyed and the required statement regarding the Michigan Right to Farm Act. Further, I agree to give permission for officials of the local municipality, county, and the State of Michigan to enter the property where this parcel division is proposed for the purposes of inspection to verify that the information on this application is correct.

ALL Property Owner's Signature(s):

Date of Request:

#### 4. PAID FEES:

□ Currently no fee for this application.

A county tax certification must be included and tax must be paid on existing parcels before final approval.

Do not write below this line. For assessor's use only.

Date taxes certified by county treasurer's office:

No. of New Parcels: \_\_\_\_\_ Total Fee: \$ N/A

REVIEWER'S ACTION: □ Approved □ Denied

Conditions:\_\_\_\_\_

Assessor's Signature: \_\_\_\_\_

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