

Leavitt Township
Oceana County
Land Combination Request

To combine contiguous parcels, please complete the application below.
If there are any questions regarding the application, please e-mail Leavitt Township Assessor
(dan.r.kirwin@gmail.com) or call (231-796-1797) with your inquiries.

LAND COMBINATION PROPOSAL:

DATE OF REQUEST: _____

Number of Parcels to be combined: _____

Main Parcel Address: _____

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

Parcels to be combined:

Parcel Number 64 - _____

Parcel Number 64 - _____

Parcel Number 64 - _____

Parcel Number 64 - _____

PARENT PARCEL OWNER:

Name:

_____ Phone: () ____ - ____ Fax: () ____ - ____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

APPLICANT REQUESTING DIVISION (IF NOT PARCEL OWNER):

Name: _____ Phone: _____ Fax: _____

Company Name: _____

Address: _____ E-Mail: _____

City: _____ State: _____ Zip: _____

LAND COMBINATION REQUIREMENTS:

1. LAND COMBINATION APPLICATION:

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

Dan.r.kirwin@gmail.com (preferred) OR Daniel Kirwin, Leavitt Township Assessor
915 Loudon St, Big Rapids, MI 49307

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.

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): _____

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

No. of New Parcels: _____ Total Fee: \$ 0

REVIEWER'S ACTION:

- Approved
- Denied

Conditions: _____

Assessor's Signature: _____

Date _____