

COMBINATION REQUEST OF CONTIGUOUS PROPERTY



Name _____

Address _____

City, State, Zip _____

Email _____

Phone _____

CURRENT:

Parent Parcel: _____ Legal Description: _____

Parent Parcel: _____ Legal Description: _____

Attached additional pages if necessary

REVISION REQUEST:

Child Parcel: _____ Legal Description: _____

I am the owner of the above properties and request the City of Garden City to combine the above noted properties into one parcel identification number

Property Owner's Signature

Date

Please attach the required following documents:

_____ Copy of the deed of the parcel(s).

_____ Letter of consent from the mortgage company if there is a mortgage on the property

_____ Sketch or survey indicating location of existing structures with metes & bounds legal description

The combination will be processed the following year in January pending approval. By January 31 all taxes and special assessments must be paid in full, including current summer and winter.

\$50 fee per parcel, both parent & child(s) is due at time of request.

6000 Middlebelt Road, Garden City, MI 48135 (734) 793-1610 FAX (734) 793-1611