CITY OF OWOSSO LAND COMBINATION APPLICATION 301 W MAIN ST. OWOSSO, MI 48867 989-725-0535 <u>BUILDING @CI.OWOSSO.MI.US</u>

\triangleright	Date:		
\triangleright			
	Property Address:		
\triangleright	Phone Number:		
\triangleright	Mailing Address (if different than Property Address):		
\triangleright	Parcel Number:		
	Zoning:		
\triangleright	Will the proposed combination require zoning	YES	NO
	changes?		
	Any current Special Assessments applied to the parcel?	YES	NO
	If YES, please explain (Special Assessments many nee combining parcels):	ed to be paid in full	prior to
\triangleright	Any current Mortgage Liens on the parcel?	YES	NO
	If YES, please explain (Mortgage Liens need approval f	from the Mortgage	Company):
	Intended Use:	RESIDENTIAL	COMMERCIAL/ INDUSTRIAL
\triangleright	Intended Purpose:		
	•		
 Legal Descriptions of current parcels to be combined: (attach additional pages if needed) 			
\triangleright	Legal Description of combined parcels: (attach additio	nal pages if neede	ed)
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Title:

Date: