MARKEY TOWNSHIP

7400 E Houghton Lake Dr, Houghton Lake, MI 48629 Office: 989-366-9614 Fax: 989-366-8631

Division / Combination / Boundary Adjustment Application

Metes and Bounds (Not in Subdivision)		Platted Lots of Record (Lots in Subdivision)	
Combination \$75		Combination \$75	
Land Division \$75 plus \$25 per n	new parcel number	Land Division \$75 plus \$25 per new parcel number	
Boundary Adjustment \$75		Boundary Adjustment \$75	
Parcel Information			
Parcel #: 008		Parcel #: 008	
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A survey, sealed by a professional survey combinations of platted lots of record in the proposed division(s) including Date, survey number, scale and romain Dimensions of the proposed divis Existing and proposed easements Easements for public utilities from Any existing improvements (building	by the Roscommon Coveyor, is required for an a subdivision. This so glegal descriptions for an arrival descriptions for an arrival descriptions for a subdivisions and/or rights and arrival each existing and prings, wells, septic systems.	ounty Treasurer located at 500 Lake St, Roscommon, MI. Il divisions/combinations/adjustments with the exception of curvey must show: r each new parcel of-way poosed parcel	
PROPERTY OWNER ACKNOWLEDGEM	ENT:		
I agree that the statements made above ar any approval will be void.	e true to the best of n	ny understanding. If found to not be true, this application and	
I agree that any outstanding special assess combination and that future special assess		of the parcels to be combined, will remain with the parcel after by be applied.	
By submitting this application, authority is g	given to Township rep	resentatives to physically view and inspect the property.	
• • • • • • • • • • • • • • • • • • • •		application, and that the foregoing answers and statements all respects, true and correct to the best of his/her knowledge	
*Note – The new "Child Parcels" creat in the year following the request.	ed from a property sp	lit or combination are recognized and brought on to the tax roll	
Signature of property owner:		Date:	
Phone Number:			
For Office Use Only:			
Date Received:	Amount R	eceived:	
Treasurer Approval: YES / NO If no, reason for denial:		Signature:	
Ordinance Approval: YES / NO If no, reason for denial:		Signature:	
Is a Site Plan Review required: YES	/NO		
Planning Commission Approval: Y	ES / NO Date:	Signature:	
Assessor Approval: YES / NO If no, reason for denial:	Date:	Signature:	