



Non-Refundable Fee: \$100

Charter Township of Emmett Request to Combine Parcels

Payment: Date: _____ \$\$: _____

Cash/CC/ Check #: _____

Receipt #: _____

Treasurer to Complete

Relevant Propert(ies)

Parcel #1: 10 - ____ - ____ - ____ Address: _____

Parcel #2: 10 - ____ - ____ - ____ Address: _____

If more than two addresses pertain to application, please attach additional sheets

Owner Parcel #1

Name of Applicant: _____

Email: _____ Phone: _____

Mailing Address: _____

Signature: _____ Date: _____

Mortgage Co: _____ Account: _____

Prior to any approval to combine parcels is received from Emmett, evidence from relevant lienholder(s) that they do not object to combination must be received by the Charter Township of Emmett.

Owner Parcel #2

Name of Applicant: _____

Email: _____ Phone: _____

Mailing Address: _____

Signature: _____ Date: _____

Mortgage Co: _____ Account: _____

Legal property description(s) (attach add'l sheets as necessary): _____

Planning/Zoning Department:

No objection to split as submitted Objection: corrections needed _____

Denied Date: _____ Signature: _____

Required Notary Witness of Signatures

Assessing: Date: _____
 No objection Denied
 BS&A updated _____

Signature: _____

All applicants shall include plans which meet the standards and specifications of the Charter Township of Emmett Zoning Ordinance or any other ordinances which regulate land development in the township. Supplemental information shall be provided related to how the development will impact public roads, utilities, and water runoff. Indication of when using private roads, wells, or septic systems is also required as appropriate.