



Leoni Township Office
 Assessing Department
 913 Fifth Street
 Michigan Center, Michigan 49254
 Phone: (517) 764-4694
 Ext: 297, 301, 302
 Email: assessingdept@leonitownship.com

Land Combination Application

After filling out, bring in or mail the application to the Assessor's Office at the address listed above.

Owner Name _____
 Address _____
 Phone _____

Parcels to be combined are as follows:

Parcel # _____	Address _____
Parcel # _____	Address _____
Parcel # _____	Address _____
Parcel # _____	Address _____
Parcel # _____	Address _____

I (we) hereby request the combination of the property tax descriptions for the parcels indicated above into a single description. I (we) realize that the new combination will not take effect until the following tax year of the request.

A Non-Refundable Application Processing Fee: **\$50**

Existing mortgage/land contract on any parcel? Yes or No
(if yes, please attach written approval from lender)

IMPORTANT: I understand I will be responsible for taxes due on the individual parcels in the year this affidavit is submitted. I also understand that all past, as well as current year taxes, must be paid by December 31st on ALL parcels in order to have the combination processed for the next year. **If taxes are not paid by December 31st, this application becomes void and the fees are forfeited.**

(Initial)

Owner's Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

Date Application Received: _____ Application Accepted By: _____

Fee Paid: Yes or No Amount Received: _____ Receipt No: _____

Current Tax Paid: Yes or No Delinquent Tax Paid: Yes or No Sewer Bill Paid: Yes or No

Special Assessment District: Yes or No School District: _____

Zoning: _____ Lender Approval Letter Attached: Yes or No

Parcel Combination Approved: Yes or No Date Approved: _____

Reasons for Denial: _____