

PINE GROVE TOWNSHIP LAND COMBINATION APPLICATION

PLEASE PRINT

ALL QUESTIONS MUST BE ANSWERED AND ALL ATTACHMENTS INCLUDED FOR PROCESSING OF THIS APPLICATION.

\$25.00 APPLICATION FEE.

MAKE PAYMENTS TO KABA 2322 Nazareth Rd. Kalamazoo, MI 49048.

All fees must be received before the application will be processed.

If you need help, or have questions, contact Bear Priest, Zoning Administrator at (269) 216-9673 or bear@zoningmi.org

PROPERTY OWNER INFORMATION:

NAME _____

ADDRESS _____

CITY, STATE, ZIP _____

* PHONE NUMBER _____

*Where you can be reached for questions or to schedule permission for a possible site visit.

A COPY OF THIS FORM WILL BE RETURNED TO THIS ADDRESS

1. Location of parent parcel/tract(s) to be combined:

Address _____ Parcel ID 80-15 _____ - _____ - _____

Address _____ Parcel ID 80-15 _____ - _____ - _____

Address _____ Parcel ID 80-15 _____ - _____ - _____

Address _____ Parcel ID 80-15 _____ - _____ - _____

2. Attachments: All attachments must be included for application to be processed

A. A survey or map/drawing of parent parcel/tract drawn to a scale of 1"=20', 1"=50', 1"=100', 1"=200', 1"=400', or 1"=1,000'. The scale used shall best represent the property and improvements. The survey or map/drawing will include the following:

1. The labeled proposed combination(s)
2. Dimensions of the proposed combination(s)
3. Scaled location of any improvements (buildings, wells, septic systems, etc.)
4. Existing and proposed road right of ways.
5. All the legal descriptions for the newly combined parcels will be labeled to correspond with the survey or map/drawing

3. Proposed Combination

_____ Combining for tax purposes only _____ Combining with a Deed

Affidavit and permission for Pine Grove Township, Van Buren County, and State of Michigan officials to enter the property for inspections:

I agree the statements made above are true, and if found not to be true this application and any approval will be void. Further, I agree to comply with the conditions and regulations provided with this Combination. I understand this is only a combination which conveys only certain rights under the applicable local ordinances, and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights. Township combination approval in no way guarantees the issuance of a building permit. If this Combination is approved, I understand Deeds or Land Contracts representing the approved combination may be required and recorded with the Register of Deeds, or any approval will be void.

Property Owner(s) Signature

Date

Property Owner(s) Signature

Date

OFFICE USE ONLY. PLEASE DO NOT MARK IN BOXES BELOW.

ZONING REVIEW:

Recommended Approval: _____

Recommended Denial: _____

Comments, if any

Signature-Zoning Administrator

Date

ASSESSOR'S REVIEW

Signature-Township Assessor

Date