

RETURN TO:

City of White Cloud
12 N. Charles St
White Cloud, MI 49349
231-689-1194



APPLICATION TO COMBINE PROPERTY

Date: _____

1. Parcels to be combined:

2. Are the taxes current? Yes _____ No _____

3. I/we understand that, by combining these parcels, it may **not** be possible to split the newly created parcel at a future date.

4. Any party having ownership interest in the above parcels must sign this application. **Failure to do so will negate this application.**

5. Name: (Please print) _____

Legal Signature: _____

Name: (Please print) _____

Legal Signature: _____

Name of Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email Address: _____

Approved by: _____ Date: _____
City Manager

Approved by: _____ Date: _____
Zoning Administrator

Copy of approved application to:

Assessor & Newaygo County Equalization