

City of Farmington Hills, Assessing Office  
31555 Eleven Mile Rd., Farmington Hills, MI 48336

[www.fhgov.com](http://www.fhgov.com)

248-871-2470 Fax: 248-871-2471

**FEE \$85**

**LAND COMBINATION**

**Administrative Review**

Acct# 101000-000-607-045

Land Combination # \_\_\_\_\_ Received by: \_\_\_\_\_ Date: \_\_\_\_\_

TO THE CITY ASSESSOR OF THE CITY OF FARMINGTON HILLS, OAKLAND COUNTY, MICHIGAN:  
I (We) the undersigned do hereby make application to the City Assessor to adjust the property herein described  
and in support of this application the following facts are shown:

**(FILL OUT ITEM 1 OR 2 – WHICHEVER APPLIES)**

1. The property to be adjusted is part of the recorded plat and located in Section \_\_\_\_\_ having an address of \_\_\_\_\_, on the \_\_\_\_\_ side of the street and is known as Lot(s) \_\_\_\_\_ of \_\_\_\_\_ Subdivision.  
Sidwell # 23-\_\_\_\_\_.

2. The Property to be adjusted is in acreage, is not part of a recorded plat and is located in Section \_\_\_\_\_, having an address of: \_\_\_\_\_.  
Total # of Acre(s): \_\_\_\_\_ Sidwell # 23-\_\_\_\_\_.

3. **STATEMENT OF OWNERSHIP:**  
**THE PROPERTY IS OWNED BY:**

NAME (PRINT): _____	NAME (PRINT): _____
ADDRESS: _____	ADDRESS: _____
CITY: _____	CITY: _____
PHONE: _____	PHONE: _____
e-Mail: _____	e-Mail: _____

I (We) \_\_\_\_\_ being the legal owner of the above described parcels,  
request the combination of referenced property per the attached survey.

_____ Signature of Owner	_____ Signature of Owner
Date: _____	Date: _____

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
\_\_\_\_\_  
County, Michigan.

Notary Public ( \_\_\_\_\_ ) My commission expires: \_\_\_\_\_

4. Name of Petitioner (if different from owner)Print: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Signature of Petitioner: \_\_\_\_\_ Phone: \_\_\_\_\_

5. **TAX BILLING INFORMATION**

Please indicate the names and addresses where the tax bills are to be sent for each new parcel created.  
Attach additional pages, if necessary:

(1) _____	(2) _____
_____	_____
_____	_____

NOTE: If mailing address is different than property address, please list both.

ALL APPLICATIONS MUST INCLUDE THE FOLLOWING INFORMATION:

- A. One (1) copy of survey at a scale of not less than 1"=50' prepared by a registered Civil Engineer or Land Surveyor showing the following:
  - 1. Existing property lines with dimensions.
  - 2. Proposed division lines with dimensions.
  - 3. Location and dimensions of any structure on the property, and any structure within (50) feet of the property under consideration. Distances from structures to proposed property lines must be shown.
  - 4. Area in square feet of each proposed new parcel.
  - 5. Width (in feet) of each new parcel at the required front setback line.
  - 6. Any existing or proposed easements with dimensions.
  - 7. Location of access for each parcel from easements or public right-of-way.
  
- B. One (1) of the legal descriptions of the existing parcel(s) and proposed parcel(s).
  
- C. Proof of ownership.

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DO NOT WRITE BELOW THIS LINE

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PLANNING DEPARTMENT APPROVAL

All new parcels meet zoning ordinance

Requirements: Yes  No

Proof of ownership submitted:

Yes  No

Division and Development Plan submitted:

Yes  No

Department Signature

Comments:

ASSESSOR'S OFFICE APPROVAL

Name on land file: \_\_\_\_\_

\_\_\_\_\_

Plat Act Compliance Yes  No

SAD, Payoffs Yes  No

Taxes Paid Yes  No

Department Signature: \_\_\_\_\_

Comments:

ENGINEERING DEPARTMENT

Approval Required: Yes  No