

City of Grayling
Application for Parcel Division/Combination

Parent Parcel Information:

Parcel Street Address _____

Property ID Number _____

Additional Information if Combining Parcels:

Parcel Street Address _____

Property ID Number _____

Property Owner Information

Applicant Information

(if different from owner)

Name _____

Name _____

Address _____

Address _____

Phone _____

Phone _____

Proposed Parcel Information

1. Attach Descriptions of existing parcels and resulting parcels.
2. Attach Certificate of Survey, if dividing parcel
3. Proposed Parcels must:
Comply with Zoning Requirements, Provide for Ingress and Egress,
Comply with State Statutes

Property Owner's Signature

Date _____

Approved:

Christie A. Verlac, City Assessor

Date _____

Ben Yoder, Zoning Administrator

Date _____