

Lot Line Adjustment Application

You MUST answer all questions and include all attachments, or this will be returned to you. Bring or mail to the Aurelius Township. Approval of a Lot Line Adjustment is required before it will be processed.

Land Division Official
Aurelius Township
1939 South Aurelius Road
Mason, MI 48854-9729
Ph.# 517-628-2093

1. PROPERTY OWNER (GRANTOR) information:

Name: _____ Phone #: _____

Address: # _____, Road Name: _____

City: _____ State: _____ Zip Code _____

2. PROPERTY OWNER (GRANTEE) information:

Name: _____ Phone #: _____

Address: # _____, Road Name: _____

City: _____ State: _____ Zip Code _____

3. Permanent Parcel Numbers to be adjusted:

33 - 09 - 09 - ____ - ____ - ____ - ____

33 - 09 - 09 - ____ - ____ - ____ - ____

33 - 09 - 09 - ____ - ____ - ____ - ____

33 - 09 - 09 - ____ - ____ - ____ - ____

4. ATTACHMENTS (all attachments must be included). Letter each attachment as shown here.

- A. Map, drawn to scale of _____ (insert scale), of parcels after adjustment.
- B. Legal Description of all adjusted parcels.
- C. Proof of ownership of all parcels to be adjusted.
- D. Tax Certification from County Treasurer of all parcels to be adjusted.

5. AFFIDAVIT and permission for township 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 parcel lot line adjustment. Further, I agree to give permission for officials of the Township, County and the State of Michigan to enter the property where this parcel lot line adjustment is proposed for purposes of inspection to verify the information on the application is correct. Finally, I understand this is only a parcel lot line adjustment and is not a representation or determination the resulting parcels comply with other ordinances or regulations, and does not include any representation or conveyance of rights in any other statute, building code, zoning ordinance, deed restriction or other property rights.

Property Owner's (Grantor) Signature: _____ Date: _____

Property Owner's (Grantee) Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE!

Official use only!

stamp date rec'd

Fee Received: _____ CK# _____

Incomplete Application returned date: _____ Resolved date: _____

Signature: _____ Date: _____

Approved

Denied

See attached letter.