

Read Both Sides

APPLICATION FOR PROPERTY DESCRIPTION CHANGE

House Bill No. 4055 requires a property tax payment certification from the county Treasurer before any parcel of land is divided. There is a \$5.00 statutory fee that the county charges. This must be provided before any property description change will be completed.

TAX CODE NO:			DATE:						
PRO	PERTY ADDRESS:								
-	re), the undersigned hereby racing reprised in the app	• •	•		n for a change in property				
1)	Type of Change:								
	Description Split Description Coml	bination	Description Change Other						
2)	Property location:								
3)	Zoning:	Size Requirements: (see attached copy of Zoning Ordinance)							
4)	Platted:	Metes & Bounds:							
5)	If metes and bounds, have the			d in the last 10 yea					
6)	Is this property vacant?	Yes		No					
7)	Attach a registered stamped certified survey indicating building location and setbacks, easements, and proposed property/legal descriptions. Survey must be in compliance with P.A. 132 of 1970.								
8)	When applicable a completed copy of the recorded master deed/amended master deed along with the bylaws and exhibits.								
9)	An electronic word document for all new legal descriptions either by e-mail or disc. If by e-mail it should be sent to: assessor@brightoncity.org								
10)	Special Assessments owing?	Yes	No	Туре	Amount				
11)	Current Owner(s) Informatio	n:							
	Name:								
	Address:								
	City/State/Zip:								
	Telephone:								
12)	Applicant's basis of representation (e.g. legal representative, owner, option to buy, etc.):								
	Remarks:								
13)	Split application fee of \$250.	00 must be paid	before property	description change	e will be completed.				

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true and correct to the best of				
Signature(s):		Date:		
			Date:	
	Date: Date: Date:			
Firm:				
Address:				
	FOR OF	FICE USE ONLY		
Fee Paid (\$250.00):			Date:	
Are Taxes Current and the cert	ification from the	county treasurer re	ceived?	
	Yes	No		
APPLICATION ACCEPTED:	Yes	No		
If denied reason for denial:				
ORIGINAL TAX CODE NO:				
NEW TAX CODE NO:				
APPROVED BY:				
Planning Department:		Date:		
City Engineer:		Date:		
City Attorney:	Date:			
City Assessor:	Date:			
COMMENTS (If	annon attack and			
COMMENTS (If you need more	space attach any a	additional documei	its):	