



Milton Township

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APPLICATION FOR PARCEL BOUNDARY LINE ADJUSTMENT

PARCEL #1

Property Location/Address: _____

Parcel/Property ID#s: _____

Name of Owner(s): _____

Name of Applicant(s): _____

Phone: _____

Address of Applicant: _____

Applicant's Interest in the Property (If not the Owner): _____

Signature of Applicant: _____ Date: _____

PARCEL #2

Property Location/Address: _____

Parcel/Property ID#s: _____

Name of Owner(s): _____

Name of Applicant(s): _____

Phone: _____

Address of Applicant: _____

Applicant's Interest in the Property (If not the Owner): _____

Signature of Applicant: _____ Date: _____

BASIS OF REQUEST TO ADJUST PARCEL BOUNDARY LINES:

Please attach a legal description of the property and a site plan drawn to scale showing the dimensions of the property and the location of all existing improvements. In some cases, Legal Property Surveys will also be required, showing Before/After parcels. (Note: Fees as listed on the Milton Township Schedule of Fees must accompany this application.)

For Office Use Only

Date of Review by Zoning Admin: _____ Zoning Admin Signature: _____

Stipulations/Conditions _____

Date of Review by Assessor: _____ Assessor Signature: _____

Recommendations/Decision: _____

Date of County Action: _____ County Action: _____

Approved / Denied and Date: _____