



# CITY OF WAYNE - Assessing Department

3355 South Wayne Road, Wayne MI 48184

Phone: 734-722-2000, ext 1014

assessing@cityofwayne.com



## Combination Application

Petitioner's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # \_\_\_\_\_

Parcel ID # \_\_\_\_\_ Parcel ID # \_\_\_\_\_

Parcel ID # \_\_\_\_\_ Parcel ID # \_\_\_\_\_

Are you the legal owner of the property? Yes \_\_\_\_\_ No \_\_\_\_\_

Is the parcel currently under appeal with the Michigan Tax Tribunal? Yes \_\_\_\_\_ No \_\_\_\_\_

### The Following Must Accompany This Application

1. Names and addresses for each combination for mailing future tax bills (use reverse)
2. Provide us with proof of current and previous three years of taxes fully paid for each parcel.
3. If combining an acreage parcel, provide new legal description of combined parcel(s) from a registered surveyor.
4. There is no fee to combine a property.

Legal Owner(s) Must Sign Application

\_\_\_\_\_

Signature of Legal Owner

Address of Legal Owner

\_\_\_\_\_

Signature of Legal Owner

Address of Legal Owner

Signature of Petitioner \_\_\_\_\_

### Office Use Only:

Taxes paid for all parcels? \_\_\_\_\_ Attach proof of payment

Metes and Bounds? \_\_\_\_\_ Attach new metes and bounds legal for new parcels

Combination approved by: \_\_\_\_\_ Date: \_\_\_\_\_

## Future Taxpayer Information

Parcel #1

Parcel ID #: \_\_\_\_\_

Name: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Parcel #2

Parcel ID #: \_\_\_\_\_

Name: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Parcel #3

Parcel ID #: \_\_\_\_\_

Name: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Parcel #4

Parcel ID #: \_\_\_\_\_

Name: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Parcel #5

Parcel ID #: \_\_\_\_\_

Name: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_