

Alaiedon Township

2021 Holt Road
Mason, MI 48854
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For Office Use Only
RECEIVED BY: _____
FEE: _____
DATE RECEIVED: _____
FEE PAID RECEIPT # _____

APPLICATION FOR BOUNDARY ADJUSTMENT

Owner's Name: _____ Owner's Name: _____

Owner's Address: _____ Owner's Address: _____

Owner's Phone: (_____) _____ Owner's Phone: (_____) _____

Owner's Email: _____ Owner's Email: _____

Property Location: _____

Parcel Number #1 _____ Zoning: _____

Parcel Number #2 _____ Zoning: _____

<u>Existing:</u>			<u>Proposed:</u>		
	#1	#2		#1	#2

Road Frontage: _____

Lot Depth: _____

Acreage: _____

Proposed Changes: Please attach to this application.

Proof of Ownership: _____ Survey: _____

Ingham County Road Department approval: _____ Ingham County Tax Certification: _____

Property Owner Signature: _____

Property Owner Signature: _____

Supervisor's Signature: _____ Date: _____

[] APPROVED
[] DENIED