



Permit #: _____

Administrative Subdivision

For the purposes of Combining Lots

Town of Clear Lake, 111 Gecowets Drive, Fremont, IN 46737

Office: (260) 495-9158 Mobile: (260) 243-6701 Email: zoning@townofclearlake.org

Applicant Information (As they appear on property tax documents)

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Parcels to be combined:

Parcel Number: _____ Parcel Number: _____

Parcel Number: _____ Parcel Number: _____

Parcel Number: _____ Parcel Number: _____

The undersigned, being the owner of record, certify that the above information is true and correct to the best of my knowledge.

Applicant: _____

Signature

Printed

Date

Applicant: _____

Signature

Printed

Date

Notary Acknowledgment:

STATE OF _____)

) SS:

COUNTY OF _____)

I hereby certify that _____ (Name) appeared before me on this _____ day of _____, 20____, and signed this form in my presence.

Notary Printed Name

Notary Public Signature

(Seal, If any)

My Commission Expires: _____

This instrument was prepared by: Robert Hawley, Zoning Administrator, Town of Clear Lake, 111 Gecowets Drive, Fremont, IN 46737.

