

Administrative Subdivision

For the Purpose of *Combining Lots/Adjusting Lot Lines*

Applicant: *Name*

Contact Information: *Address*
Fremont IN 46737
Phone

Parcels to be Combined: *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:

Typed Name

Date: *Month day, year*

This instrument was prepared by: Gary Johnston, Zoning Administrator
Town of Clear Lake
111 Gecowets Drive, Clear Lake, Fremont IN 46737
260.495.9158

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law Gary Johnston.

