

## 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*

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This instrument was prepared by: Amy Schweitzer, 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 Amy Schweitzer.*

