

OFFICE OF THE CHIEF FINANCIAL OFFICER
Office of the Assessor
DETROIT

Requirements for ALL parcel modification requests:

2 Woodward Avenue, Suite 828 * Detroit, Michigan 48226

Phone: 313•224•3024 Website: www.detroitmi.gov Email: AssessorsLandRecordsMaintenance@detroitmi.gov

Parcel Revision Checklist

* Requirements are subject to change without notice. Additional documentation may be requested before acceptance. *

Application Farms
Application Form:
Parcel Revision Form must be completely filled out and have original signatures. Copies, scans, faxes, photos, or otherwise reproduced versions will not be accepted.
Proof of ownership:
_
Provide <u>recorded</u> deed(s) for all involved properties. Must be original or a copy or scan; photos will not be accepted.
For properties under Land Contract:
Provide a copy of the <u>recorded</u> land contract. Must be a copy or scan; photos will not be accepted.
Land contract vendor must be the requestor for the parcel revision (see Signatory Authorization below).
All involved parcels must be under contract. Parcels under contract cannot be combined with parcels that are no
Ownership/taxpayer information must be up to date for all parcels. Provide a copy of all Property Transfer Affidavit(s) that have been filed only within the last 60 days.
Signatory Authorization:
ALL PARTIES with ownership or taxpayer interest MUST provide authorization for a parcel revision in one of the following
ways:
For individual (non-entity) owners:
Provide photo ID for identity verification. No authorization document is needed to sign the application.
☐ To assign a representative, owner must provide a NOTARIZED Resolution of Authority (attached), <i>explicitly</i>
naming the representative that will sign the application on behalf of the owner. The original document must be
provided. Copies, scans, faxes, photos, or otherwise reproduced versions will not be accepted.
For companies/organizations/other entities, one of the following:
A <u>NOTARIZED</u> Resolution of Authority (attached) to authorize a member of the company/organization .
Certificate must explicitly name the representative that will sign the application on behalf of the company. The
original document must be provided. Copies, scans, faxes, photos, or otherwise reproduced versions will not be
accepted.
A <u>NOTARIZED</u> Power of Attorney to authorize a representative that is not a member of the
company/organization (chain authorization will not be accepted) . The original document must be provided. Copies, scans, faxes, photos, or otherwise reproduced versions will not be accepted.
Other Requirements:
Parcels must not have any delinquent Property or Personal Property taxes, or property tax liens.
Parcels must not have an open Michigan Tax Tribunal (MTT) case.
Parcels must not have a Special Assessment or PILOT (with the exception of Detroit Land Bank purchases, see next item)
For properties purchased from the Detroit Land Bank Authority within the last 5 years, a 5/50 waiver must be provided
(see additional documentation).
Parcels must be adjacent to be combined, or an approved council resolution for vacation of a public right of way(s) mus
be provided (can be obtained from Department of Public Works - City Engineering, Room 642).
Exemption status and type must be consistent for all parcels.
Combinations of properties with inconsistent class must be approved by an appraisal supervisor.
Additional Requirements for PARCEL DIVISIONS ONLY:
All divisions are subject to an approval process by the City of Detroit Law Department.
Please note: If new addresses are required for resultant parcels, requestor will be invoiced by the Department of Public
Works - City Engineering (Suite 642, CAYMC) for \$13 per address.
☐ Land survey showing current and resultant parcel(s) and corresponding legal description(s), as well as all building
locations. If a building is being divided, survey must show that parcel boundary is along a firewall and be certified by a
licensed architect.
A parcel may not be split more than four (4) times.
Resultant parcel must have direct access to a public road right-of-way. Landlocked parcels will not be accepted.
A \$5.00 fee is required for each new parcel being created as a result of a division. An invoice will be sent to Primary Part
after receipt of original documentation.





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Parcel Revision Form

Revision is effective for the <u>following tax year</u>. All taxes must be current at the time of application and up to the time of processing of this request. Revisions cannot be made to Special Acts parcels without prior consent of the Board of Assessors.

Request Type:	☐ Comb	ination	ı	[Split				Split/Combine		
Date Submitted	:										
Primary Party						Secondary	y Par	ty			
Owner Name					(Owner Nan	ne				
Address					1	Address					
City, State, ZIP					(City, State,	ZIP				
Phone						hone					
Email					1	Email					
Print Name					ı	Print Name	5				
Signature					9	Signature					
Check here if	you are a	Represe	ntative				ere i	f you are	a Representative		
Third Party						Fourth Pa	rtv				
Owner Name						Owner Nar					
Address						Address					
City, State, ZIP						City, State,	7IP				
Phone						Phone	4 11				
Email						Email					
Print Name						Print Name	2				
Signature						Signature					
Check here if	vou are a	Ponroco	ntativo				oro i	f you are	a Representative		
		кергезе	IIIative			CHECK II	iere i	i you are	a Representative		
Parcel Informat		1				D1 N			Adduses		
Parcel Number	Add	dress				Parcel N	umbe	er	Address		
									421-G for the regulations		
subdivision	of land in the	City of D	etroit, you pl	ace the foll	owing leg	al descriptio	ns of s	aid premis	ses upon the Assessment	and Tax Rolls.	
	T		T _		fice Us	e Only					
Revision Year		.	Rev	ision #			1		request is to obtain		
Law Departmer	it Petition	Ħ			Num	ber of resu	uitani	parceis	(for splits and split/o	ombines):	
New Parcel #		Surv	ey#	Addres	s						Party
			•				Γ.				
		Оппсе	Notes				<u>'</u>	Reviewe			
								O	office of the Assessor Stam	p for Approval	I .



COLEMAN A. YOUNG MUNICIPAL CENTER

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Resolution of Authority

Please note: The Person who signs the annlication on hehalf of the Rusiness Entity must be o

Office Use Only

of the individuals listed as a person authorized to exe behalf of the Business Entity or Owner.	, —— I Revision Vear
Business Organization:	
Location of principal office:	
A. Form of Organization	
	Liability Company (complete Sec B-3) ☐ Partnership (complete Sec B-5) oprietorship (complete Sec B-4) ☐ General ☐ Limited
B. Authorization - Complete ONLY the Section to	hat is applicable or matches the business structure checked.
1. Individual/Owner. I, {owner} of	{parcel address} , authorize the following to take such steps on my behalf, that may be necessary and appropriate in
	Parcel Revision request submitted to the City of Detroit.
Name Title	Signature
	{Owner Signature}
STATE OF MICHIGAN)) ss.	
COUNTY OF WAYNE) The foregoing instrument was asknowledged before me.	on, 20 by
The foregoing histrument was acknowledged before the	JII
	Print:
	Notary Public,County, MI
	My commission expires: Acting in County of
2. Corporate Authority.	
	not signing petition} Secretary of the above-name Business/Organization, do
	at which a quorum was present, the Board of Directors of the full force and effect and in accordance with the articles of incorporation and
	orized to execute, deliver, and to take such steps, on behalf of the Corporation, on with, and in support of any Petition for Parcel Revision request submitted
Name Title	Signature
	
	Witness my hand on behalf of the Corporation this day of, 20
	Secretary
STATE OF MICHIGAN)) ss. COUNTY OF WAYNE)	,
The foregoing instrument was acknowledged before n	ne on, 20 by
	Print: Notary Public,County, MI
	My commission expires:
	Acting in County of





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, {name of me	<pre>ember not signing petition or authorized agent} the undersigned Company", hereby certify that</pre>
ompany is a limited liability company and is duly organize	zed and existing under the laws of the State of Michigan.
	e of member signing petition} Member of
	ments, to take such steps on behalf of said Company, that may be
	port of any Petition for Parcel Revision request submitted to the City
Pate, 20	
ompany Seal if Available	
	{Signature of Member names in First Blank}
TATE OF MICHIGAN)	
) ss.	
OUNTY OF WAYNE)	
he foregoing instrument was acknowledged before me on	, 20 by
	Print:
	Print:County, MI
	My commission expires:
	Acting in County of
If there is only one Officer/ Member/ Partner with upport of the Resolution of Authority i.e., current An	nual Report/Statement, Certificate of Assumed Name, Certificate of
If there is only one Officer/ Member/ Partner with upport of the Resolution of Authority i.e., current Andormation, Articles of Incorporation as filed with the State	signing authority, please provide the applicable form documents inual Report/Statement, Certificate of Assumed Name, Certificate of Michigan.
If there is only one Officer/ Member/ Partner with upport of the Resolution of Authority i.e., current Andormation, Articles of Incorporation as filed with the State 5. Partnership Authority.	nual Report/Statement, Certificate of Assumed Name, Certificate of Michigan.
If there is only one Officer/ Member/ Partner with upport of the Resolution of Authority i.e., current Andormation, Articles of Incorporation as filed with the State 5. Partnership Authority. I, {name of me General/Limited Partner of	ember not signing petition or authorized agent} the undersigne the "Partnership", hereby certify that:
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