



CITY OF BATTLE CREEK, MICHIGAN

OFFICE OF THE CITY ASSESSOR
JUDITH A. MUDGE, CITY ASSESSOR

REQUEST TO SPLIT PLATTED PARCEL

Please split the following platted parcel for the _____ tax year:

Parcel ID Number: ____ - ____ - ____ - ____

Please attach the legal description and/or a survey if available, and provide the following information:

List the improvements that will be situated on the following parcels that are shown on your survey sketch:

PARCEL 1:

PARCEL 2:

I understand this change will take effect in March of the tax year stated above.

Signature:	Date:
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Mail completed form to:

**Battle Creek City Assessor
PO Box 1717
Battle Creek, MI 49016-1717**
