## Village of Almont

Planning & Zoning Department 817 N. Main Street Almont, MI 48003 810-798-8528

## AFFIDAVIT OF OWNERSHIP OF LAND

STATE OF MICHIGAN COUNTY OF			
I/We			
Name(s)			
Of			
Address	City		Zip
Phone:		Email:	
the	of _		
Title		Name of Company	
being duly sworn, depose(s) and say(s	) as follows:		
<ol> <li>The owner(s) of the property desc</li> <li>□ Warranty Deed □ Land Cont</li> <li>Is/are as follows:</li> </ol>	ract 🛛 Other Docu	ment (specify)	
Name		Address	
Name		Address	
Name		Address	
This property is the subject of a _			
	pe of application		
Application submitted to Village o	f Almont		
Name(s)		•	
tne Title(s)		of Name of Company	
• •		паше от сотрану	
Address	City	State	Zip
Phone:		Email:	
to be my/our designated representation my/our behalf in connection with obta	•	g of the application and to make representations an /our request	d commitments or
Signature of Property Owner		Title of Property owner (if applicable)	
Printed Name of Property Owner		-	
Signature of Property Owner		Title of Property owner (if applicable)	
		Subscribed and sworn to before me	on
Printed Name of Property Owner		the day of	
. ,			
		(	
		My commission expires:	