

**PARADISE LAKE IMPROVEMENT BOARD
REQUEST TO AMEND ASSESSMENT ROLL**

Assessment Year (s) _____ Signature of applicant _____

PART A: Identification (Print)

Owner Name(s): _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Property Address (or attach legal description if no address available):

PART B: LAKE ROLL REVISION (attach additional sheets as necessary)

Property ID Number (Attach copies of a Tax bill for each #)	Original PLIB SAD assessment amount	Adjusted PLIB SAD assessment amount (to be filled out by PLIB)	Dollar Difference (to be filled out by PLIB)
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

Reason(s) for request:

FOR PLIB USE ONLY

PLIB DECISION

Approved _____ Conditions, if any, that must be met prior to changes being made on next assessment roll: _____

DENIED _____ Reason for denial: _____

PART C: CERTIFICATION We the undersigned of the Paradise Lake Improvement Board swear and affirm that the above information is correct, to the best of our knowledge:

Signature, Chairman	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date		

FILING DATE: This form may be submitted at any time to the PLIB, PO Box 52, Carp Lake, MI 49718, for consideration of changes to units of benefit or property category. Changes in property description must be submitted to the Carp Lake Township assessor prior to March 1 of an assessment year to amend the tax roll and the assessment roll.