

VILLAGE OF LEXINGTON
PROPERTY REAPPORTIONMENT & LOT SPLIT
APPLICATION

Date: _____

Name: _____

Address: _____

Property Tax ID #: _____

Dimension of original lot: _____

Dimensions of new parcel/s: _____
(Parent Parcel) _____

Zoning District: _____

Proposed changes: _____

_____ Site Plan attached: (Including placement, relative to property lines, of all structures on the property)

_____ Survey Attached

Reviewed By: _____ Date: _____

Approved by the Village of Lexington: _____ Date: _____

Referred to Township Assessor: Date: _____

Fee for Processing: _____ Cash _____ Check # _____

By: _____