

Return Address:

Affidavit of Correction of Boundary Line Adjustment

	Permitting File Number				
Recording Number:	Approvals				
	Department of Local Services, Permitting Division	Department of Assessments			
	Examined and approved this ____ day of _____ 20____	Examined and approved this ____ day of _____ 20____			
	PERMITTING	ASSESSOR			
	Examined and approved this ____ day of _____ 20____	Examined and approved this ____ day of _____ 20____			
	DEVELOPMENT ENGINEER	DEPUTY ASSESSOR			
		ACCOUNT NUMBER			
Quarter Section, Township and Range	¼ of	¼,	Section	Township	Range
GRANTOR			GRANTEE		
LEGAL DESCRIPTION					

