

Request for Split/Combine Form

I am requesting the following (chose one of the following):

Combine (Titles must be identical)

Split

Other: _____

Date Requested: _____

Parcel(s) Number(s): _____

ALL owners listed on the title must sign this request!

Owner Information:

Name (print): _____ Signature: _____

Name (print): _____ Signature: _____

Phone Numbers: Home: _____ Cell: _____
 Office: _____ Fax: _____

Pertinent Notes: _____

Administration Use Only!

Deputy Receiving Request: _____ Date Received: _____

Deputy Completing Request: _____ Date Completed: _____

***** Please Note: Under FSS 193.1554 & 193.1555, there may or may not be an increase in value of property which is attributable to combining or dividing property. *****

The following items need to be met before combine/spit/reconfiguration can be completed:

- Taxes are paid on all parcels.
- The title on all parcels are identical.
- Parcels are contiguous for combines.
- Parcels fall within one Taxing Authority/Redevelopment District.
- Legal description provided for splits/reconfiguration