

Request to Combine Tax Parcels

Step I This section to be completed by property owner:

Tax Key Numbers Involved:

Requested by: _____

Phone Number: _____

Reason For Combination Request:

Recording area

Request to Combine Tax Parcels.
This is an Internal Document

_____ Owners signature _____ Date

As separate lots, are these properties buildable? _____ Yes _____ No

Are there any landlocked parcels involved? _____ Yes _____ No

Have deed restrictions been recorded in the Register of Deeds Office:

_____ Yes _____ No If **yes** list Document # _____ Vol _____ Page _____

Is building(s) location situated across multiple lots? _____ Yes _____ No

Step II It is the responsibility of the property owner to have this section completed by the County Treasurer, Municipal Clerk/Treasurer and the Municipal Assessor:

Combination approved by County Treasurer (Any outstanding real estate taxes owed? If yes, combination cannot be completed.):

Signed: _____ Date: _____

Combination approved by Municipal Clerk and/or Treasurer (Does this combination affect special assessment billing? If yes, combination cannot be completed.):

Signed: _____ Date: _____

Combination approved by Municipal Assessor:

Signed: _____ Date: _____

Return COMPLETED form to: Register of Deeds
PO Box 994
Port Washington WI 53074-0994