

AUTHORIZATION TO COMBINE PARCELS

REQUIREMENTS

- > All Property Taxes must be Paid in Full.
- > All Parcels must have the same deeded owners
- > All Parcels must be in the same Municipality & School District
- > All Parcels must be free of mortgages or be encumbered by a common mortgage.
- > All Parcels must be adjacent.
- > ALL applicable local regulations have been met if required.

Steuben County Real Property Office
 3 E. Pulteney Sq.
 Bath, NY 14810
 (607) 664-2373
 Fax (607) 664-2168

ASSESSOR/PROPERTY OWNER USE

Requested By:	Date:	
Owner (If Different):	Telephone:	Day:
Owners Address:		Eve:
City, State, Zip:	Email:	

Municipality:	Swis:	School District
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TAX MAP NUMBERS TO BE COMBINED

Please list each parcel separately on lines provided (Use Additional Sheet if Needed)	Tax Map Numbers	Location Description	Deed Reference (Book & Page)	Deed Date
1)				
2)				
3)				
4)				
5)				
6)				
7)				

PROPERTY OWNERS ACKNOWLEDGEMENT

I (We) the undersigned owners of the Real Property described above request that the above mentioned property be combined and I (We) understand that the reversal of this merge may not be possible without consent of the local Planning Board. I (We) acknowledge that the above stated requirements have been met and I (We) will hold the Steuben County Real Property Tax Service, as well as the above stated municipality, harmless for any problems resulting from such merger. (Attach a separate sheet for additional signatures).

Signature of Owner:	Date:
Signature of Owner:	Date:

All Owners MUST sign, so attach an additional sheet for the additional owners.

Please make any remarks, which may assist the Technician to do research, on the reverse side of this form. Also include any Surveys, Abstracts, Wills, Plots, Etc that may be applicable.

ASSESSOR'S ACKNOWLEDGEMENT

I (We) the undersigned Assessor(s) for the above state municipality find that the properties described above should be combined on the following assessment roll as they are contiguous, and have common ownership. The Real Property Tax Service and its Mapping Division are hereby authorized to combine the aforesaid parcels and assign one number to the resulting parcel. This acknowledgement makes no claim to the effectiveness of the merger relating to local lot statue and is not a substitute for any local regulation or required board approval process in affect

Suggested Parcel Number _____

Assessor's Signature:	Chairman or Sole Assessor	Date:
Assessor's Signature:	Member-Board of Assessors	Date:

NOTE: All of the above needs to be completed in order for request to be reviewed and finalized.

FOR RPTS TAX MAPPING USE ONLY

<input type="checkbox"/> Unpaid Taxes Found	Notes:
<input type="checkbox"/> No Unpaid Taxes Found	

- All owners above are in title to all parcels listed All parcels are in the same municipality and school district
 All parcels above are contiguous (adjoining and/or separated by road, railroad, or river/stream)

Tax Map Number T.B.K.A. _____
 Mapper's Signature _____
 Date _____

Reason for Denial:

****Assessor- Do Not update/delete parel in RPS until you receive the updated data sheets from the Real Property Mapping Department.**