

OWNER'S REQUEST TO COMBINE PARCELS

Name: Jason Schultz

Address: N1807 S Main St. & the Parcel (no address) to the immediate north

Phone #: 608-295-6891

Parcel numbers you wish to combine:	Zoning Districts	Tax District
<u>016-0514-0941-030</u>	<u>R-2</u>	<u>1</u>
<u>016-0514-0941-029</u>	<u>R-2</u>	<u>1</u>
_____	_____	_____

REASON FOR REQUEST: For eventual annexation to the City of Fort Atkinson and subsequent pocket neighborhood development

*Combinations requested in the current year will appear on the following year's assessment and tax rolls unless otherwise requested. **Request combined tax bill for Current year**_____



- 1) Parcels must meet the following minimum requirements to be eligible for combination into one tax parcel:
 - a) All parcels are contiguous
 - b) The ownership for all parcels is held exactly the same
 - c) The parcels are in the same municipality and tax district
 - d) There are **no delinquent taxes**

- 2) The combination has been approved by the owner

 Owner signature _____
Date

- 3) **AFTER OWNER HAS APPROVED COMBINATION BY SIGNING THIS FORM, RETURN TO:**
 Jefferson County Land Information Office
 Jefferson County Courthouse
 311 S Center Ave Rm 101
 Jefferson WI 53549
 Phone: (920)674-7254

- 4) The combination has been reviewed by County Treasurer for any delinquent taxes.

 Jefferson County Treasurer signature _____
Date

- 5) The combination has been reviewed by the Zoning Department

Comments: _____

 Zoning department signature _____
Date

All County Departments must sign and comment before the Assessor's signature and approval. The Assessor may use other criteria to approve or deny this request.

- 6) The combination has been approved by the municipal assessor

 Assessor signature _____
Date



OFFICE USE ONLY. DO NOT FILL IN BELOW THIS LINE.

_____ Date request was received
 _____ Date request was completed