

COMBINATION REQUEST FORM

IF YOU HAVE ANY QUESTIONS, CALL THE ASSESSOR'S OFFICE AT (928) 524-4091.

NO FILING FEE IS REQUIRED WITH THIS FORM. IT IS FOR THE ASSESSOR'S OFFICE USE ONLY. THE PURPOSE OF THIS FORM IS SOLELY FOR THE PROTECTION OF THE PROPERTY OWNER(S). IT DOES NOT PERTAIN TO OTHER DEBTS OR AGENCIES, RULES AND REGULATIONS. WHEN COMPLETED, RETURN TO THE ASSESSOR'S OFFICE FOR PROCESSING.

SIGNING THIS FORM ACKNOWLEDGES THAT THE FRONT AND BACK OF THIS FORM HAVE BEEN READ AND IS CORRECT.

IF LOCATED IN CITY LIMITS; CITY OFFICIAL SIGNATURE REQUIRED

CURRENT USAGE					
PARCEL NUMBERS	RESIDENTIAL	VACANT	AGRI	COMM	RENTAL

NAME _____ DAYTIME PHONE NUMBER _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

PROPERTY ADDRESS-IF AVAILABLE _____

OWNER'S SIGNATURE (**ALL OWNERS MUST SIGN**) _____ DATE _____

OWNER'S SIGNATURE (**ALL OWNERS MUST SIGN**) _____ DATE _____

DO NOT WRITE BELOW THIS LINE—OFFICE USE ONLY
TO BE RETURNED TO PROPERTY OWNER AFTER COMPLETION

YOUR REQUEST TO COMBINE PARCELS: _____
HAS BEEN APPROVED.

THE NEW PARCEL NUMBER IS: _____

COMBINATION IS EFFECTIVE FOR THE _____ TAX ROLL.

SINCERELY,

DATE MAILED _____

ASSESSOR'S OFFICE –MAPPING DEPT _____

REQUIREMENTS FOR COMBINING PROPERTY

1. The names on the deeds for both properties must be identical.
2. The form of ownership (right of survivorship, trust, etc.) on all parcels must be identical.
3. The properties must be contiguous (must have a common property line, all or part of said line).
4. Both properties must be in the **same taxing area code**.
5. Combination **cannot** be completed unless both properties are in the same subdivision.
6. Combination **cannot** be completed if one property is in a subdivision, and the other is not.
7. If properties to be combined are in the City Limits of Show Low; the Town of Pinetop/Lakeside, City of Holbrook; Town of Snowflake; Town of Taylor or City of Winslow an official from the Community Development Department ***must*** approve this combination before it can be processed.

All combinations will be reviewed for any individual peculiarities and handled on a case by case basis.

Mail To:

NAVAJO COUNTY ASSESSOR'S OFFICE
P.O. BOX 668
HOLBROOK, AZ 86025

