



GeoSpatial Services Division

A Division of Department of Technical Services
 Unified Government of Wyandotte County/Kansas City, Kansas
 710 North 7th Street, Suite 200
 Kansas City, Kansas 66101
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Request to Combine Tax Parcels

I, the undersigned owner/taxpayer of below-described tax parcels (Requester), request that they be combined into one property record for tax billing/valuation purposes.

Requester believes that the below-stated '*Requirements to Combine Tax Parcels*' are met for parcel combining. Requester also acknowledges and understands: 1) This is a combination of tax records. It has no effects on property ownership, title, or legal description; and 2) Combining properties may result in a change in property assessment/taxes. Owner is responsible for notifying lender of any such changes.

Parcel Number 1		Address, City, Zip	
Parcel Number 2		Address, City, Zip	
Parcel Number 3		Address, City, Zip	
Check here <input type="checkbox"/> and use back of this form if you need to add additional parcel numbers			

Requester Name and Address (Please Print)	City, State, Zip	
	Telephone(Day)	
	Telephone(Eve)	
	Email Address	

Requester Signature		Date:	
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Requirements to Combine Tax Parcels

- 1) Parcels must be adjoining and contiguous. Parcels cannot be separated by dedicated right-of-way.
- 2) Parcels must have identical owner names on deeds (names must match exactly)
- 3) Property taxes must be paid up (no delinquent taxes)
- 4) Parcels must be located in same tax unit
- 5) This request must be submitted in writing—can be mailed, emailed, faxed, or handed to this office

Staff Use Only

TRANSMITTAL FORM # _____

Requirements Checklist:

Request is: Approved Denied (Reason for non-approval):

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	No taxes due
<input type="checkbox"/>	<input type="checkbox"/>	Parcels are contiguous
<input type="checkbox"/>	<input type="checkbox"/>	Identical ownership
<input type="checkbox"/>	<input type="checkbox"/>	Same tax unit

If denied, was Requester contacted? Y N
 Date completed ____ / ____ / ____
 Clerk Init _____