

REQUEST FOR DELETE & TIE OR SPLIT

DATE: ___/___/___

PRINT OWNERS NAME: _____

MAILING ADDRESS: _____

OWNERS PHONE #- _____

I request the Land Records Department. of the Property Appraiser's Office to:

TIE _____ **SPLIT** _____ **FOR TAX YEAR** _____
(ATTACH: RECORDED LEGAL DESCRIPTION FOR SPLIT)

You will need to make an updated Homestead Exemption Application, if you are requesting to tie &/or split your property.

The following Real Estate #'s must be titled the same:

RE# _____ RE# _____

RE# _____ RE# _____

R.E# _____ RE# _____

RE# _____ RE# _____

RE# _____ RE# _____

RE# _____ RE# _____

Appraiser / Date: _____

Information Room Employee/Date: _____

Mapper Employee / Date: _____

Panel Number: _____

Tile Number: _____

Are all taxes current & paid on above Assessment Numbers?

YES: ___ NO: ___ PER OWNER STATEMENT.

ALL BLANKS TO BE COMPLETED & SIGNED BY OWNER BEFORE PROCESSING

OWNER'S SIGNATURE: _____