

OWNER'S REQUEST FOR CONSOLIDATION

REC. REGISTER NOV 29 2021

The undersigned owner(s) hereby request the Lincoln County Assessor's Office to consolidate the following tax account numbers in accordance with ORS 308.210

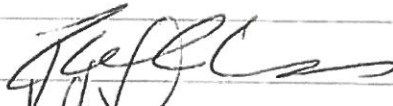

MAP #	TAX LOT #	CODE #	PROPERTY ID (R) #
14-12-26-CD	200	302	R252625
14-12-26-CD	300	302	R254951

Items 1-6 must be checked off before the consolidation request can be processed. Items 7 and 8 must be checked off and a letter attached if they apply.

1. X Ownership must be identical on all parcels being consolidated.
2. X Tax lots must be on the same map, or capable of being shown on the same map. If not on the same map, **MUST** be approved by Assessor's mapping department.
3. X Tax lots must be contiguous.
4. X All titleholders must sign (husband and wife, etc.).
5. X Taxes must be paid in full on all accounts, ORS 308.210 (4). *MAILED 11/20/21*
6. N/A Date and initial of Planning Authority approval. (only if outside city limits) _____.
7. N/A Letter of approval if there is a mortgage on any part of the property.
8. N/A Letter of approval from Deed holder if it is the contract purchaser making the request.

NOTE:

1. Request made after June 30th will be processed for the following tax year.
2. You will continue to receive separate tax statements for each code involved.
3. Consolidation of accounts may not reduce assessed value.
4. Once consolidated, Planning approval and a deed may be required to split apart.

<i>Kendra Covee</i>		11/23/21
<i>Kelly Lattin</i>		11/23/21
Print name(s)	Signature(s)	Date

M 11855

*****FOR OFFICE USE ONLY*****

All taxes certified for collection under ORS 311.105 and 311.110 on all properties listed above are paid in full.

<u> AB </u> Tax Office Deputy Initials	<u> 12-22-21 </u> Date
<u> SAO </u> Assessor's Deputy Initials	<u> JY#26 JUN 22-23 </u> Journal Voucher Number
	<u> 12-22-21 </u> Date