

## APPLICATION FOR TAX SEGREGATION

Request is hereby made that the property described in the document recorded in volume \_\_\_\_, page \_\_\_\_, of the official records (a copy is attached) be separately valued on the current roll to permit the payment of current taxes for the fiscal year \_\_\_\_ - \_\_\_\_ and of any supplemental roll taxes that apply to said property. Said property is part of the current assessment roll.

I further request that the tax created by the assessment of (personal property, leasehold improvements, possessory interests) be allowed to remain as a lien on the property to be separately valued.

Attached is a certification by the (name of taxing agency or revenue district), setting forth the portion of the lien that is to be attached to the property described in the above-referenced document.

No such lien is to be attached to said property.

As the undersigned applicant, I hereby certify that I have an ownership interest in the subject property and that this request and application is not made for the purpose of avoiding requirements of the Subdivision Map Act or local ordinances and that a parcel map has:

Been filed for record in volume \_\_\_\_\_, page \_\_\_\_\_, of the official records.

Not been filed for record.

It is agreed that this request and application shall be binding upon my heirs, assignees, and successors in interest.

I hereby declare under penalty of perjury that, to the best of my knowledge and belief, the foregoing is true and correct.

\_\_\_\_\_  
NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
ADDRESS

# APPLICATION FOR TAX SEGREGATION

[To be completed by Tax Collector's Office]

To: (county) County Assessor

Contained herein is a request for a separate valuation of the parcel described, which is a portion of the original:

ASSESSMENT	PARCEL NUMBER	TAX-RATE AREA

The said property is not covered by a subdivision map filed for record since the lien date for this current year, nor has the original assessment been divided into more than four parcels, including the parcel remaining.

\_\_\_\_\_  
\_\_\_\_\_  
County Tax Collector  
State of California

Executed at (time), (county) County this (day) day of (month), (year).

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[To be completed by Tax Collector's Office]

To: (county) County Auditor

Pursuant to the request contained herein, values of the parcel described above and of the parcel remaining are as follows.

## Parcel Described Above:

PARCEL NUMBER	LAND	IMPROVEMENTS	PERSONALTY	EXEMPTIONS
NAME		ADDRESS		

## Parcel Taken:

PARCEL NUMBER	LAND	IMPROVEMENTS	PERSONALTY	EXEMPTIONS
NAME		ADDRESS		

\_\_\_\_\_  
County Tax Collector  
State of California

Executed at (time), (county) County this (day) day of (month), (year).