Tax Parcel Combination Request



Request Date: March 30,2023		
Owner/Taxpayer Name: Hig	gins Homes LLC	
Mailing Address: PO Box 864	Anoka, MN 55303	
Email Address:		
List the parcel Identification num	pers to be consolidated:	
Parcel ID	Parcel ID	Parcel ID
24-041-0310		
West Half of 24-041-0330 (Parcel A) as shown in attached survey.		
tax year. Pursuant to MS 272.46 Sub 2, I/v	·	urrent year to be considered for the following the tax parcels and descriptions of the above es.
I acknowledge that taxes must be accepted (MS 272.121).	e paid in full on all parcels being co	mbined at the time the combination is
	not responsible for a Combination	any if there is a mortgage on one or more of which has not received a partial release or
	t if I/we wish to sell one parcel late	ove any SPLIT of the above combined r, it will then be considered a split and subject
I/we understand that by signing t	his form it does not guarantee that	the above combination will be approved.
Owner/Taxpayer Signature		Date:
Reviewed & Approved:		

Tax Parcel Combination Request



Auditor / Deputy	V
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Date Receive	ed:		_			
Same Owners	hip	□YES	□NO	Special Assessments	□YES	□NO
Same School [Dist.	□YES	□NO	Tax Increment District	□YES	□NO
Current year ta	axes paid in full	□YES	□NO	Parcels are Contiguous	□YES	□NO
Delinquent Tax	xes	□YES	□NO	Sewer District	□YES	□NO
Bldg.	Parcel #	<u>Tor</u>	/ Abst.	<u>Description</u>	on (Tax Parcel A	Abbrev)

Combined Parcel #

New Combined Tax Description (Abbreviated)