

REQUEST TO DIVIDE PARCELS

James W. Fitch, Kern County Assessor-Recorder
1115 Truxtun Avenue
Bakersfield, CA 93301-4639

FOR OFFICE USE ONLY	
APPROVED: _____	BY: _____
FEE AMOUNT: _____	PAID: _____
COMPLETED: _____	BY: _____
NOTIFIED: _____	

Attention Mapping Section:

I, the undersigned, request that the parcel currently referenced as:

ASSESSOR PARCEL NUMBER _____

be divided into _____ separate parcels, as follows:

(Provide a **legal description** for each new parcel, or attach a map or diagram showing exact measurements. Also indicate the **site addresses** and the **location of any improvements** currently being assessed. Use additional sheets as necessary.)

I certify that I am a legal owner (or authorized agent) of the parcel referenced above. I understand that this change is for assessment purposes only and does not necessarily constitute the creation of legal parcels for purposes of zoning or subdivision law.

 Date Signature

Owner's Name (please print) Phone (daytime)

 Notification Address Fax

 City State Zip E-mail

Agent's Name (if applicable; please print) Phone (daytime)

 Notification Address Fax

 City State Zip E-mail

CONDITIONS FOR APPROVAL:

1. A processing fee of \$60 is required for each parcel to be divided. Check or money order payable to *County of Kern*.
2. Request must be received in our office by the end of May to be processed for the tax roll being prepared.

FOR OFFICE USE ONLY	
FILE NO: _____ _____ _____	TAX YEAR: _____ _____ _____
NEW APN(S): _____ _____ _____	
Rev. 02/20/2003	