



# Lake County Assessor & Tax Collector

513 Center Street  
Lakeview, Oregon 97630  
(541) 947-6000  
Fax (541) 947-7012  
Dave Knowles, Assessor

## AUTHORIZATION FOR CARTOGRAPHY

**PLEASE TELL US WHAT YOU WISH TO HAVE ACCOMPLISHED WITH CHANGING YOUR PROPERTY PARCEL(S):**

*\*Check all that apply\**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Segregation                     | <input type="checkbox"/> Map or GIS Correction   | <input type="checkbox"/> Splitting tax lot U1 U2 U3        |
| <input type="checkbox"/> Partition                       | <input type="checkbox"/> Combining/Merging Accts | <input type="checkbox"/> Record of Survey                  |
| <input type="checkbox"/> Lot Line Adjustment             |  | <input type="checkbox"/> Is this tax lot 10 acres or less? |
| <input type="checkbox"/> Other: (please describe below): |  |  |

### PLEASE CONSIDER THE FOLLOWING BEFORE COMPLETING THIS REQUEST:

- **DELINQUENT TAXES:** Oregon Revised Statute 308.210(4) does not allow property parcel(s) changes with delinquent taxes owing. YOUR TAXES FOR THE CURRENT YEAR MUST BE PAID.
- **OWNERSHIP:** Parcels to be consolidated must be contiguous and have identical ownership, and all owners must agree and authorized changes.
- **CHECK LOCAL PLANNING LAWS.** After requesting the change of parcel(s), some planning departments require a formal approval letter.
- **MORTGAGES:** If one or more of the parcels have a mortgage, you should contact your mortgage company for approval prior to submitting your request.
- **ALL OWNERS** are required to sign this request.
- **NEW DEED:** A copy of the new recorded deed should be submitted to this office and attached to this form to start the process of the change to your property. This can be a copy of original and should have document # listed here: \_\_\_\_\_
- **SURVEY:** Do you need a formal survey completed and submitted to the Building and Planning Department to complete your change?

### I/We request that the following parcels be changed from the current cartography:

Account Number	Map Number	Tax Lot Number

**\*\*Please attach a county plat map with the before and after changes to assist us with your changes\*\***

Print Name of Owner(s) \_\_\_\_\_ Date \_\_\_\_\_  
 Street Address \_\_\_\_\_ Daytime Telephone Number \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Signature of Owner or Owners (all owners must sign) \_\_\_\_\_ Date \_\_\_\_\_

\*Signature of Planning Dept. Director \_\_\_\_\_ Date \_\_\_\_\_ \*Signature of Assessor \_\_\_\_\_ Date \_\_\_\_\_

Land use file # \_\_\_\_\_

**\*\* Return Completed Form to the Assessor's Office \*\***