REQUEST TO DIVIDE PARCEL

Laura Avila, Kern County Assessor-Recorder

1115 Truxtun Av	/enue	sor-Recorder	FOR OFFICE USE ONLY					
Bakersfield, CA 93301-4639			APPROVED ON: FEE PAID ON:				BY:	
				COMPLETED ON:				
Attention Mapping Section:				NOTIFIED VIA:	LETTER L	PHONE L	EMAIL 🗆	
I, the undersigned	d, request that the	e parcel currently re	eferenced as	:				
ASSESS	OR PARCEL NU	MBER						
be divided into _	separate	parcels, as follow	rs:					
(Provide a description	n of each new parcel,	referencing the existing	g legal lots.)					
that this change i	s for tax assessm	authorized agent) nent purposes only ses of zoning or sul	and does no	t necessarily			FOR OFFICE USE ONLY	
Date					TAX YEAR:			
Owner's Name (please print)			Phone (daytime)					
Notification Address			Fax					
City	State	Zip	E-mail				NEW APNs:	
Agent's Name (if applica	able; please print)	Phone (dayt	me)			ls:		
Notification Address			Fax					
City	State	Zip	E-mail					
CONDITIONS FOR	R APPROVAL:							

- A processing fee of \$175.00 is required for each parcel to be divided. Please use a separate form for each division. Fees are payable to *County of Kern*.
- Request must be received in our office by the end of May to be processed for the tax roll being prepared.

Rev. 10/24/2022