

**SAGINAW COUNTY
COMBINATION REQUEST**

For Assmt Year: _____

Date Submitted: _____

Combinations cannot be completed if any of the following are true:

- Delinquent Taxes Exist
- Title does not match
- Parcel classified as a County Land Bank Sale

Note: Legal description of Child Parcel will consist of exact wording of parent parcel descriptions, joined by the words "AND ALSO" unless a new description is provided by the assessor.

Parent Parcel #s		

Child Parcel Information			
Parcel # _____	Property Class _____	In Village? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Improved <input type="checkbox"/> Vacant	
Owner's Name _____	Special Assessments _____	_____ in DDA?	
Mailing Address _____	Property Address _____		
City _____ State _____ Zip _____	City _____ State _____ Zip _____		