

BREAKDOWN / PROPERTY SPLIT REQUEST

DATE OF REQUEST: _____

PPI / SCHEDULE NUMBERS TO BE SPLIT:

*** Accurate new legal descriptions or a survey must be provided to indicate how parcels are to be split.**

SIGNATURE OF INDIVIDUAL REQUESTING BREAKDOWN / PROPERTY SPLIT:

- OWNER: _____ PHONE #: _____
OR
- AGENT: * _____ PHONE #: _____

***Agents need to provide letter of authorization to act on owner's behalf in this matter**

FOR OFFICE USE ONLY

REQUEST TAKEN BY: _____ DEPT: _____

IS TAC CORRECT: YES _____ NO _____ IF NO, ENTER CORRECT TAC: _____

COMMENTS: _____

NEW PPI / SCHEDULE NUMBER(S): _____

DATE BREAKDOWN COMPLETED: ____/____/____

COMPLETED BY: _____

**RETURN TO : ARAPAHOE COUNTY ASSESSOR'S OFFICE
ATTN: BETTY FINE
5334 S. PRINCE ST
LITTLETON, COLORADO 80166-0001**