## COMBINATION REQUEST

\*\* IF ANY PARCELS HAVE A MORTGAGE ON THEM NO COMBO ALLOWED
UNLESS LETTER FROM MORTGAGE COMPANY RECEIVED AT TIME OF REQUEST \*\*

OWNER NAME:  PARENT PARCEL (S) :	
ANY & ALL PARCELS REQUESTED TO BE COMBINE	ED MUST BE DEEDED IN THE SAME NAME(S)
** IF ANY PARCEL(S) ARE IN PA 116 PROGRAM NEED OPEN SPACE PROGRAM - QUESTIONS TO THEM CAL	
BY SIGNING THIS FORM I AM AUTHORIZING THE AB SO THE PROPERTY MAY NOT BE ABLE TO BE SPLIT B	
	AT COMPLIES WITH THE REQUIREMENT XES AND SPECIAL ASSESSMENTS DUE ON THE PARCEL OR TRACT AID FOR 5 YEARS PRECEDING THE DATE OF THE APPLICATION.
** COMBINATION REQUESTS HAVE TO MEET LOCAL THAT THE NEW PARCEL COULD OR WILL BE BUILDAN	. ZONING AND OR ORDINANCES, APPROVAL DOES NOT QUALIFY BLE **
** PLEASE BE AWARE REQUESTING A COMBINATION IN HIGHER TAXES !!	N MAY AFFECT YOUR (PRE) HOMESTEAD STATUS MAY RESULT
OF THE CURRENT YEAR TO BE PROCESSED FOR THE	UST BE RETURN NO LATER THEN THE FIRST WEEK OF DECEMBER FOLLOWING ASSESSING/TAX YEAR ALONG WITH CURRENT YEAR & RECEIPTS PROVIDED FOR COMBO TO TAKE PLACE
SIGNATURE:	DATE:
PHONE:E	MAIL:
APPROVED:	DENIED:
TWP SIGNATURE:	DATE: