

FULTON COUNTY BOARD OF ASSESSORS
PARCEL CONSOLIDATION REQUEST

Combine the following properties:

Parcel Number: _____

Parcel Number: _____

Parcel Number: _____

Parcel Number: _____

Parcel Number: _____

Parcel Number: _____

Owner or Authorized Agent Name (Print)

Owner or Authorized Agent Signature

Date

Print Email Address: _____

Telephone Number: _____

<u>For Office Use Only</u>	
Received By: _____	Date Received: _____

Must be received by April 1, 2024 to be applicable for the current tax year

This form is not valid unless signed by a staff member

Consolidation Request Information

Please read carefully before completing the attached consolidation request form.

1. Proof of identification is required by the property owner or authorized representative.
2. All properties must be in the same current owner(s) name.
3. Properties must be in the same land lot/sheet number.
4. Properties must be contiguous.
5. Properties must be the same property class code (i.e., exempt or taxable).
6. Properties must be in the same municipality or tax district.
7. Consolidation request form must be received April 1st to be applicable for the current tax year.
8. Be sure to request a copy of your request once the staff has signed the form.

Note: Ownership consolidations are not valid for development planning purposes. Contact the appropriate municipality to request necessary permits.