



# Real Estate Combination Request Form

This Real Estate Combination Request Form must be completed prior to the processing of your property identification number (tax number) combination request. After obtaining approvals and signatures from the applicable authority listed on the back of this form, return the **original** form and any related documentation in person or by mail (cannot be FAXED!) to the Supervisor of Assessments Office. Combinations are processed **after** 2<sup>nd</sup> installment of taxes are paid.

### Combination Request Checklist:

- Previous and current year's taxes have been paid in full. Properties with back taxes owed cannot be combined.
- A Planning Official from the municipality where the property is located has reviewed parcels to be combined and has signed this form. **(B)**
- Parcels are contiguous and have the same tax code
- An Addressing Official from the municipality where the property is located has reviewed the parcels to be combined, assigned addresses and signed this form. **(C)**
- Parcels are in title to the same person(s).
- All titleholder(s) have signed this form. **(A)**

**Please List the Permanent Index Number to be combined:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Tax Bill Mailing Address:**

\_\_\_\_\_

*Name*

\_\_\_\_\_

*Street*

\_\_\_\_\_

*City*                      *State*                      *Zip Code*

\_\_\_\_\_

*Phone Number*

**FOR ADDRESSING OFFICIAL:**

Name of municipality where it is located

\_\_\_\_\_

Site Address of Combined Parcel

\_\_\_\_\_

**(A) Signature(s) of Titleholders:**

\_\_\_\_\_

*Titleholder's Signature*

\_\_\_\_\_

*Print Name*

\_\_\_\_\_

*Titleholder's Signature*

\_\_\_\_\_

*Print Name*

**(B) Signature of Planning Official:** \_\_\_\_\_

*Planning Official's Signature*                      *Date*

**(C) Signature of Addressing Official:** \_\_\_\_\_

*Addressing Official's Signature*                      *Date*

**RETURN OR MAIL TO:**  
**Supervisor of Assessments Office**  
**Attn: Parcel Maintenance Specialist**  
**404 Elm St., Room 301**  
**Rockford, IL 61101**

**Questions? Call: (815) 319-4477**