



Request for Tax Parcel Division

KANE COUNTY ASSESSMENT OFFICE

719 Batavia Avenue, Building C
Geneva, Illinois 60134-3000
(630) 208-3818

(Please Print)

Owner of record: _____

Mailing Address: _____

Telephone: _____ Email: _____

Tax Parcel Number(s) to be divided: _____

I hereby certify that:

- I request that the Kane County Supervisor of Assessments divide this parcel into one or more parcels;
- I am (check one):
 - The legal owner of record of the parcel;
 - An officer of the corporate owner of the parcel;
 - The trustee of the land-trust owner of the parcel; or
 - An attorney licensed to practice law in Illinois who has attached power of attorney signed by the owner.
- The parcel is not part of a condominium;
- All property taxes for all parcel(s) billed in the current year have been fully paid;
- I understand that if the request is made after August 31 of the year, it will be effective for the following taxable year; and
- I assume all responsibility for any impact from local land-use laws.
- I have attached a legal description or survey showing the boundaries of the parcels to be created.

Number of parcels to be created from this parcel: _____

Requester's Signature(s) _____ Date _____