

BREAKDOWN / PROPERTY SPLIT REQUEST

DATE OF REQUEST: _____

PIN / SCHEDULE / AIN 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 NUMBERS: _____

DATE BREAKDOWN COMPLETED: _____ / _____ / _____

COMPLETED BY: _____

All approved breakdown requests received January 1st through June 30th of any given tax year are worked as mid-year work for that same tax year, unless one of the original (parent) numbers was protested. All requests received July 1st through December 31st of any given tax year are worked for the following tax year.

**RETURN TO: ARAPAHOE COUNTY ASSESSOR'S OFFICE
ATTN: JASON NIELSON
5334 S. PRINCE ST.
LITTLETON, CO 80120-1136
303-795-4653**