

BUNCOMBE COUNTY LAND RECORDS DEPARTMENT
REQUEST FOR PROPERTY SPLIT

DATE: _____

MAPPER: _____

PLEASE NOTE:

This split is done at the property owner's request. The Land Records Department cannot verify that this change will increase or decrease your real property tax value. If you want to continue this process, your signature signifies your agreement to this statement and knowledge that Land Records has no control over tax values related to your property. There must be a metes and bounds description for the parcel to be split attached to this form. If the property that you are splitting is in the Asheville City Limits, you may be required to have a survey (per City of Asheville Zoning). If you have an escrow account set up to pay taxes on the parcel you are splitting, it cannot be split.

Township/Pin	Acreage	DB/PG	DATE	PB/PG	Lot	Stamps	Subdivision Name
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_____	_____	_____	_____	_____	_____	_____	_____
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SITUS ADDRESS _____

ACCOUNT # _____

Owner: _____

C/O: _____

Address: _____

Phone: _____

Signature: _____

FOR OFFICE USE ONLY

Completed By: _____

NOTES: