	VICTORIA CENTRAL APPRAISAL DISTRICT				<u>T</u>	GIS Department Notes:	
	CUSTOMER REQUEST FORM						
Victoria Central Appraisal District							
DATE	REQUE	STED BY:	APF	PRAISER			
CLERK	_		OW	/NER/AGENT			
REQUEST TYPE: (select all t	that apply)						
SPLIT (Pending Sur	rvey) MERGI	E í	RESEARCH	МА	P CORR	OTHE	R
(PLEASE READ)							
MERGES: All question must be		•		anted			
*SPLITS: Questions marked w		e required for	a split request			YES	NO
SAME OWNER ON PROPERTIES?							
(Owner must be the same on all properties in order to merge)							
ARE PROPERTIES ADJACENT/CONTIGUOUS?							
*ARE ALL PROPERTY TAXES PAID?							
(Owners should pay all past year taxes prior to merging properties and, if possible, all							
current years taxes for every property involved)							
*ARE PROPERTIES MORTGAGED?							
(If "Yes", attach approval letter from lender/bank. If proof is not provided, the request will be denied)							
*ARE PROPERTIES AGRIC							
(Ag exemption may need to b							4
ARE THERE EXEMPTIONS?	(Check all that app	DIY)					
_	OV65*	DAV*	DRH*	TDA			
*Owner is aware that a merge/split of properties may recalculate the OV65, DAV, and DRH exemptions and cause the taxes to increase; PLEASE INITIAL							
EFFECTIVE YEARS							
ACCOUNT (GEO ID)#							
OWNER NAME							
PHONE		EMAII	L				
OWNER ADDRESS							
CITY			STATE	ZIP			
REMARKS (LIST ACCOUNTS	THAT ARE REQUE	STED TO BE P	PROCESSED):				
OWNER / AGENT SIGNATU							

NOTE: If requested by owner / agent, this form must be signed in order to be processed.