



Vermilion County, Illinois Request to Combine or Split Parcels

VERMILION COUNTY SUPERVISOR OF ASSESSMENTS OFFICE
Courthouse Annex
6 North Vermilion Street, 4th Floor
Danville, IL 61832

Phone: (217) 554-1940
E-mail: assessor@vercounty.org
Online: <http://www.vercounty.org/SupAssm.htm>

Section 1: Instructions

A. Requirements to Combine or Split Parcels:

- All current and previous real-estate property taxes must be paid in full.
- The combination or splitting of parcels does not guarantee that the parcel may be built upon or improved based upon local permitting requirements. Please check with your local jurisdiction(s).

B. Specific Requirements to Combine Parcels:

- Ownership must be identical for all parcels involved.
- Parcels must be located within the same section.
- If within a subdivision, they must be located within the same subdivision.
- All parcels must be located within the same taxing district boundaries (within the same tax code).

C. Specific Requirements to Split Parcels:

- A survey is required designating new parcel boundaries.
- Legal descriptions of all new parcels to be created.

D. Application: Requests must be received on or before October 31st to be considered for the taxes payable the following year. Submittal of this form does not guarantee that the request will be complete for the following tax year. The Supervisor of Assessments Office reserves the right to decline any combination or split request. Once the combination or split is complete, notification will be sent to the mailing address below.

Section 2: Owner Identification (please print)

Owner Name(s): _____

Mailing Address: _____ City, State, Zip: _____

Telephone: _____

Section 3: Property Identification for Combination (please print)

Tract Number and P.I.N.(s):

Property Address:

New Parcel Property Address: _____

Section 4: Property Information for Split (please print)

Tract Number and P.I.N.:

Property Address:

Date of Survey: _____

** Please attach a copy of the survey, corresponding legal descriptions, and addresses. **

Section 5: Owner Signature

Signature of Owner(s): _____ Date: _____

For Office Use Only:

Date Received: _____ Initials: _____