CLAYTON COUNTY
COMMUNTIY DEVELOPMENT DEPARTMENT

PARCEL: COMBINATION – REPARCEL REQUEST FORM
(Do Not Use For Parcel Separation)

DATE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

REQUIRED: ALL PROPERTY OWNER(S) MUST BE THE SAME ON ALL PARCELS

I hereby request and authorize the Clayton County Tax Assessor, Property Mapping Division to:

◯ COMBINE the following properties. **USAGE:** ◯ Commercial or ◯ Residential

◯ REPARCEL in accordance with the attached plat, or survey or deed.

Parcel(s): _____

Parcel(s): _____

Parcel(s): _____

Parcel(s): _____

PLEASE NOTE:
This request is subject to all Zoning & Building Requirements under the jurisdiction of unincorporated Clayton County. If you have any further questions concerning Zoning & Building Requirements, please contact Planning & Zoning or the Building Department for clarification.

Please submit this form and the recorded survey or plat to the Tax Assessor's Office.

SIGNATURE: _____ **PRINT NAME:** _____
(Owner or Authorized Agent)