



COUNTY OF CLARION OFFICES OF GIS, MAPPING & ASSESSMENT



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COMBINATION OF PROPERTY

Date: \_\_\_\_\_

Name of property owner(s) as appears EXACTLY on the deed(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address of Taxpayer: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Map Number	Control Number	Deed Book/Page Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**I request that the above contiguous properties of real estate and/or mineral rights be combined for taxing purposes.**

Signature of taxpayers

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_