



# COUNTY OF YOLO

ASSESSOR'S OFFICE  
625 COURT STREET, ROOM 104, WOODLAND CA 95695  
(P) 530.666.8135 (F) 530.666.8213  
**JESSE SALINAS**  
ASSESSOR



## Property Owners Request for Parcel Change

A combination merges two or more assessor parcels into one property tax bill for property tax assessment purposes only. It does not imply legal lot status nor does it constitute legal lot approval by a planning authority.

Without exception, all the following conditions must be met:

1. Only the property owner or legally authorized agent can request to have a parcel combined for property tax purposes.
2. Taxes are current on all parcels; no delinquent taxes are due.
3. The recorded ownership of all parcels must be the same.
4. All parcels must be in the same Tax Rate Area (TRA); unless the size of the parcel to be combined or moved across existing TRA boundaries is less than 45,000 square feet or less than \$50,000 in value (R&T Code 606 (b) (c)).
5. All parcels must be contiguous (directly adjoining each other and not separated by a roadway).
6. Parcels are not subject to a Williamson Act land conservation agreement.
7. Requests must be received by January 1 to ensure timely processing for the next property tax year.

Please complete this form and return to: **Yolo County Assessor, Attn: Mapping Division,**  
**625 Court Street, Room 104, Woodland CA, 95695** or [assessor@yolocounty.org](mailto:assessor@yolocounty.org).

I have read the above conditions and believe that all of them have been met. I request, therefore, that the following assessor parcels be combined for the next property tax year:

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

4. \_\_\_\_\_ 5. \_\_\_\_\_ 6. \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Owner/Agent's Name (please print)

\_\_\_\_\_  
Phone (daytime)

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Email

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### ASSESSOR USE ONLY:

**NOTIFICATION OF COMBINATION:** ☐ APPROVED ☐ DENIED

New APN(s): \_\_\_\_\_ As of Tax Year: \_\_\_\_\_

Completion Date: \_\_\_\_\_ By: \_\_\_\_\_

Taxpayer Notified Via: ☐ LETTER ☐ PHONE ☐ EMAIL on DATE: \_\_\_\_\_

Comments: \_\_\_\_\_