



**ERNEST J. DRONENBURG, JR.**  
 SAN DIEGO COUNTY ASSESSOR/RECORDER/CLERK  
 1600 PACIFIC HIGHWAY, ROOM 103  
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 Telephone (619) 531-5588  
 www.sdarcc.com

# SEGREGATION REQUEST

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

PLEASE SEGREGATE THE FOLLOWING PARCELS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PARCELS CAN BE SEGREGATED IF ALL OF THE FOLLOWING CONDITIONS ARE AGREED TO

PLEASE CHECK RECORD BEFORE GOING FURTHER (All must be checked):

- ] The owners understand that this request does not supersede requirements pursuant to zoning, building, lot split or subdivision ordinances.
- ] The owners understand that this request does not supersede requirements pursuant to filing with the Tax Collector to have any parcel separately valued on the current roll for the purpose of paying taxes. (Explain for which roll this request is applicable)
- ] There are no defaulted property taxes on any of the parcels

THE REASON FOR THIS REQUEST IS: (Please check one)

- ] Condominium Plan or Certificate of Compliance on file.
- ] Owner's map per R&T Code 326.
- ] Split according to lot lines from a recorded map.
- ] Recreate parcel according to a same prior parcel.
- ] Other: \_\_\_\_\_

Owner (Or authorized agent):

|  |  |
|--|--|
| <b>Personnel required information:</b> |  |
| Name:(Print) _____                     |  |
| Telephone No: _____                    |  |
| Signature: _____                       |  |

|                     |  |
|---------------------|--|
| Name: _____         |  |
| Telephone No: _____ |  |
| Address: _____      |  |
| Email: _____        |  |
| Signature: _____    |  |

Owner's Telephone No. (If signed by agent): \_\_\_\_\_