

NEMAHA COUNTY REQUEST FOR ACTION FORM

Owner: _____

Physical Address – Current:

Name: _____

Address: _____

State/Zip: _____

Mailing Address – New:

Name: _____

Address: _____

State/Zip: _____

Parcel Numbers – Real Estate:

Parcel Numbers – Personal Property:

ACTION TO BE TAKEN: (CHECK ALL THAT APPLY)

- Combine Parcels for Assessment
 - * *All taxes must be paid before combination of parcels can be processed*
 - * *Parcels must have the same owners (spelled the exact same), be in the same tax district, and be adjoining in the same sub-division.*
- New Property Mailing Address
- Statements or Notices Mailed to Different Address
 - * *See above mailing address*
- Improvements Added or Removed from Parcel
- Other
 - * *See below comments section*

COMMENTS:

Signature: _____

Date: _____

Printed Name: _____

Phone: _____

-----Nemaha County Personnel Use Only-----

Date Received: _____ **Employee Initials:** _____

Date Recorded: _____ **Employee Initials:** _____

Requestor is: **SELF** **FAMILY** **OTHER**

Comments:

