

**OFFICE OF
JUNEAU COUNTY TREASURER**

220 East State Street, Room 112
Mauston, WI 53948
608-847-9308

REQUEST FOR SEPARATE TAX BILLS ON SPLIT PARCELS

Wisconsin Statutes provide that a parcel of land is taxed as it exists on January 1st of that tax year.

If you wish to receive your own tax bill, in December, please complete the attached form. (If your real estate agent/attorney/title company has already completed this form with you, please disregard this letter.)

INSTRUCTIONS

Complete Part A of the request form.

Mail the form to the appropriate assessor, attaching copies of surveys and deeds in the mailing.

Enclose a self-addressed, stamped envelope for the assessor to return the form to you. (The assessor will return the form to you, for your signatures, after the Board of Review for your municipality has been held. Board of Review is usually held in mid-summer.)

Review the divided assessments and obtain signatures of the grantor and grantee.

Return the completed form by **October 15th** :

Juneau County Treasurer
220 E. State Street, Room 112
Mauston, WI 53948

REQUEST FOR SEPARATE TAX BILLS ON SPLIT PARCELS
(Maximum Splits Per Parcel-THREE)

If a parcel of real estate is divided, the owner(s) of the divided parcel may request a valuation of the divided parcel. The value of each new parcel shall represent a reasonable apportionment of the valuation of the original undivided parcel, and the total of the new valuation shall equal the valuation of the original undivided parcel on January 1 of that year.

If you wish to receive separate tax bill for the year in which a parcel of land is divided, **this form must be filled out completely and returned by October 15th of the tax year to:** JUNEAU COUNTY
TREASURER'S OFFICE, 220 E. STATE ST., MAUSTON, WI 53948.

COMPLETE PART A ---FORWARD FORM TO ASSESSOR (INCLUDE SELF ADDRESSED STAMPED ENVELOPE.)

<i>PART A</i>	
THIS SECTION TO BE COMPLETED BY REAL ESTATE AGENCY/LEGAL FIRM/TAXPAYER	
Original Parcel Number that is being split _____	
GRANTOR/SELLER_____	GRANTEE/BUYER_____
ADDRESS_____	ADDRESS_____
PHONE_____	PHONE_____
LEGAL DESCRIPTION – ATTACH COPY OF RECORDED DEED	LEGAL DESCRIPTION – ATTACH COPY OF RECORDED DEED
ACRES_____	ACRES_____
CHECK ONE OF THE FOLLOWING: () VACANT LAND () LAND & BUILDINGS	CHECK ONE OF THE FOLLOWING: () VACANT LAND () LAND & BUILDINGS

ASSESSOR – COMPLETE PART B AND RETURN FORM TO BUYER/SELLER/OR AGENT

<i>PART B</i>	
THIS SECTION TO BE COMPLETED BY ASSESSOR	
GRANTOR/SELLER VALUATION: ACRES ___ LAND _____ CODE CLASS _____	GRANTEE/BUYER VALUATION: ACRES ___ LAND _____ CODE CLASS _____
ACRES ___ LAND _____ CODE CLASS _____	ACRES ___ LAND _____ CODE CLASS _____
ACRES ___ LAND _____ CODE CLASS _____	ACRES ___ LAND _____ CODE CLASS _____
ACRES ___ LAND _____ CODE CLASS _____	ACRES ___ LAND _____ CODE CLASS _____
IMPROVEMENTS _____ CODE CLASS _____	IMPROVEMENTS _____ CODE CLASS _____
ASSESSOR'S SIGNATURE_____	DATE_____

BUYER AND SELLER SIGN FORM-RETURN TO COUNTY TREASURER BY OCTOBER 15TH

We the undersigned agree with the values the Assessor has placed on the real estate listed above and agree to pay real estate taxes based on the above valuations.

GRANTOR'S SIGNATURE_____ DATE_____

GRANTEE'S SIGNATURE_____ DATE_____