

Process for Voluntary Merger of Parcels

PJR-009

Purpose

A voluntary merger of parcels (tax lots) which are in common ownership may be executed by an owner(s) to:

1. reduce taxes;
2. meet the Permit and Resource Management Department's (PRMD's) Well and Septic Division's requirement that a septic system be located entirely on one parcel;
3. respond to a determination by PRMD that parcels in common ownership are not separate legal lots.

The result of the merger process is the recordation of the attached Voluntary Merger Notice at the County Recorder's Office. Thereafter, the County Assessor will assign one Parcel Number (APN) for the merged parcels (if possible). It may take the Assessor's Office several months to assign a new APN for the merged parcels.

Definitions

Assessor's Parcel Number (APN) represents a taxable unit of land that is under a specific ownership and tax assessment rate. A single legal parcel might have several APNs if it is being assessed at different tax rates. Conversely, a single APN might represent several legally separate parcels.

Separate Legal Parcel A parcel of land that has been legally separated from all adjoining parcels under the provisions of the Subdivision Map Act of the State of California.

NOTE: Once parcels have been merged they cannot be un-merged except through the subdivision process.

Procedure

1. The owner(s) shall complete the Notice of Voluntary Merger form, including addresses and parcel numbers. All owners listed on the deeds shall have their signature(s) notarized at the bottom of the form. (NOTE: PRMD does not have a notary available to the public.)
2. The owner(s) shall also fill out the attached Treasurer-Tax Collector Referral.
3. The owner(s) shall submit the completed Notice of Voluntary Merger form, and Treasurer-Tax Collector Referral to PRMD. The planner at the Zoning Cubicle shall initiate the application, which will establish a Voluntary Merger file number. This number shall be placed on the Voluntary Merger Notice and the Treasurer-Tax Collector's form.
4. The owner(s) shall then go to the Treasurer-Tax Collector's Office - Fiscal Building (585 Fiscal Drive, Room 100) and have the Referral forms signed.
5. The owner shall return to PRMD, and the planner at the Zoning Cubicle shall have his/her signature notarized on the Notice of Voluntary Merger form. The planner shall provide the owner(s) with a copy of the Notice of Merger that the Recorder may stamp as a "Conformed Copy" (proof of recordation) for their records, as the original stays with the Recorder and is eventually returned to PRMD.
6. The owner shall then pay the PRMD Cashier for the Notice of Voluntary Merger.
7. The owner shall return to the Fiscal Building and record the Notice of Voluntary Merger at the Recorder's Office (Rm 103). The owner can have the Recorder stamp the copy of the Notice of Voluntary Merger as a "Conformed Copy."

Sonoma County Permit and Resource Management Department

2550 Ventura Avenue Santa Rosa, CA 95403-2829 (707) 565-1900 Fax (707) 565-1103

Required Application Materials

In order to expedite our review of your application, please provide the following items. The number of copies required is indicated where multiple copies are required. Your application will not be accepted unless all required materials are provided.

1. Completed Notice of Voluntary Merger: Shall be signed by all legal owners of record and each signature shall be notarized.
2. Assessor's Parcel Map: One 8 ½ in. X 11 in. Copy of the current Assessor's Parcel Map with the parcels to be merged clearly indicated. Maps may be obtained from the County Assessor's Office or PRMD.
3. Current Deed or Deeds for Property to be Merged: A copy of the deed for each parcel to be merged shall be provided. These should be legible and all legal owners shall be listed.
4. Current Title Report: A title report prepared within the last six (6) months listing all legal owners of record and all lien holders shall be provided.
5. Completed Treasurer-Tax Collector's Referral Form: The Treasurer-Tax Collector's form shall be signed by the Treasurer-Tax Collector's Office.

Filing Fees

See current PRMD Project Review Fee Schedule.

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WHEN RECORDED MAIL TO:
**SONOMA COUNTY PERMIT AND RESOURCE
MANAGEMENT DEPARTMENT - PROJECT REVIEW
2550 VENTURA AVENUE
SANTA ROSA, CA 95403**

Space above this line for Recorder's use

VM _____ - NOTICE OF VOLUNTARY MERGER

Upon the recordation of this document at the Sonoma County Recorder's Office, the areas described shall comprise one legal parcel.

Pursuant to Section 66499.20-3/4 of the Subdivision Map Act and Section 25.13.11 of the Sonoma County Code, the recordation of this Notice by the owner of the property evidences the owner(s)'s intention to extinguish any underlying lot or parcel lines, or portions thereof, which were previously established by deed or subdivision map.

It is understood by all legal owners of the above described property that once this Notice of Voluntary Merger is recorded, the parcels described become one legal lot of record and any later division of this property will be subject to the rules and regulations in effect at that time including, but not limited to, the Subdivision Map Act and any local ordinances adopted by the County of Sonoma.

The parcels were merged at the request of:

Owner(s) of Record:

Print	Signature
_____	_____
Print	Signature
_____	_____
Print	Signature
_____	_____
Print	Signature
_____	_____

Mailing Address: _____

Attach Notary's Statement for All Property Owners.

Site Address(es): _____

Current Deed(s) of Ownership:

- Parcel 1: Document No.: _____ - _____, Sonoma County Records
OR Assessor' Parcel Number: _____ - _____
Book _____ Page _____, Sonoma County Records
- Parcel 2: Document No.: _____ - _____, Sonoma County Records
OR Assessor' Parcel Number: _____ - _____
Book _____ Page _____, Sonoma County Records
- Parcel 3: Document No.: _____ - _____, Sonoma County Records
OR Assessor' Parcel Number: _____ - _____
Book _____ Page _____, Sonoma County Records
- Parcel 4: Document No.: _____ - _____, Sonoma County Records
OR Assessor' Parcel Number: _____ - _____
Book _____ Page _____, Sonoma County Records

Pursuant to Section 66499.20 3/4 of the Subdivision Map Act of the State of California and Section 25.13.11 of the Sonoma County Code, the Permit and Resource Management Department of Sonoma County does certify that the real property described above has been merged to form one legal parcel.

The requested Merger was approved by:

Print Planner's Name

Signature

Representing the Sonoma County Permit and
Resource Management Department

Date

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA)
)ss
COUNTY OF SONOMA)
)

On _____ before me, _____, Notary Public, personally appeared, _____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature _____

(SEAL)

**TREASURER-TAX COLLECTOR
REFERRAL**

DATE: _____ FILE # _____

TO: PERMIT AND RESOURCE MANAGEMENT DEPT. ATTN: _____

FROM: TREASURER-TAX COLLECTOR

SUBJECT: _____ ASSESSOR'S PARCEL # _____

WITH ASSESSOR'S PARCEL #: _____

PROPERTY ADDRESS: _____

APPLICANT: _____

MAILING ADDRESS: _____

PROPERTY OWNER'S NAME (Receiving land to be combined):

MAILING ADDRESS: _____

_____ FISCAL YEAR'S TAXES ARE NOW A LIEN, NOT YET DUE AND PAYABLE. NOTE: THE REGULAR SECURED TAX BILL WILL BE ISSUED ON THE OLD PARCEL NUMBER. IF YOU WOULD LIKE THE BILL TO BE DIVIDED, YOU MUST CONTACT OUR OFFICE PRIOR TO NOVEMBER 30 TH TO REQUEST A FORMAL OR AN INFORMAL SEGREGATION.

_____ FISCAL YEAR'S TAXES AND/OR DELINQUENT TAXES ON THESE PARCELS HAVE BEEN PAID.

_____ NO SPECIAL ASSESSMENTS.

SONOMA COUNTY TREASURER

_____, 20____
DATE

SONOMA COUNTY TAX COLLECTOR

_____, 20____
DATE