

**CITY OF MAPLE GROVE  
ADMINISTRATIVE PARCEL DIVISION / COMBINATION FORM**

DATE: \_\_\_\_\_

Mr. Jim Holan, Property Identification Supervisor  
Department of Property Tax and Public Records  
A-600 Government Center  
Minneapolis MN 55487-0060

Dear Mr. Holan:

Please Divide \_\_\_\_\_, Combine \_\_\_\_\_, Both \_\_\_\_\_ the lands described below per the following request:

PID: _____	PID# _____
PID: _____	PID# _____
PID: _____	PID# _____

Request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Remark: \_\_\_\_\_  
\_\_\_\_\_

City of Maple Grove Tax Year: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

City Council Action Date: \_\_\_\_\_

Approved,

Alan A. Madsen, City Clerk  
City of Maple Grove, Minnesota