

PR-CUTOUT Tax Year: 08/15/2024 v1

Request for Cut-Out of Parcels

Owner(s): Site Address: Parent STRAP:

Legal Description:

FILING REQUIREMENTS

This request must be completed by the owner(s) of record as of January 1st of the year in which the split is to be applied. Splits may only be requested January 1st through July 1st of each tax year.

Please see page 2 for a full list of requirements.

IMPORTANT NOTICES

Prior Approval by County Offices

A parcel split by the Property Appraiser's Office is for ad valorem taxation purposes ONLY, and does not imply the legality of the land division being requested, the legality for such parcel to be conveyed via land title nor the suitability of such parcel to be developed. Prior legal approval for parcel splits from the appropriate zoning, planning or community development agency of your jurisdiction is STRONGLY **ENCOURAGED**. It is recommended to contact the appropriate land development, zoning, and/or planning department of your jurisdiction for questions concerning property development. The St. Johns County Property Appraiser does not issue determinations regarding the legality of parcel splits, and will not advise owners on such matters.

SUGGESTED CONTACTS:

St. Johns County	County Development Review Division	(904) 209-0660
City of St. Augustine	Planning and Zoning Director	(904) 825-1065
City of St Augustine Beach	Planning and Zoning Director	(904) 471-8758

Assessment Limitation "Cap"

Parcel splits may affect the market and/or assessed value of the subject parcels, and may increase taxes by affecting existing capped values. A split will relinquish the 3% "Save Our Homes" Cap or my 10% Non-Homestead Cap (deferred assessment) on the parcel being split. If at a future date you choose to reverse the process, the assessment limitation "cap" will NOT be restored to its former level.



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REQUIREMENTS

Please read each requirement below and initial to indicate your response. If any of the following criteria is not met, your parcel may not be eligible for a cut-out during this tax year.

- 1. Were you the owner(s) of record as of January 1st of this year?
 - Yes (please initial)

If you were not the owner of record as of January 1st, you are not eligible to request a cut-out for this tax year without the prior owner's signed consent. You may request a "DR-518 – CUTOUT REQUEST" with the Tax Collector's Office after the tax bills are sent out (approximately November 1st). A "DR-518 – CUTOUT REQUEST" will split the tax bill for that year.

- 2. Have all taxes currently payable, due or delinquent, been paid on the parent parcel?
 - _____ Yes (please initial)

Pursuant to F.S. 197.192 the Property Appraiser's Office will not split parcels until all taxes currently payable, due or delinguent, have been paid to the Tax Collector's Office.

- 3. A recorded legal description (e.g. deed, plat, survey, etc.) of the proposed cut-out parcel must be provided. Please select and provide one of the following:
 - I/We are requesting that the following Platted Subdivision Lot(s) or Condominium Unit/ Garage Number be cutout ______. I/We have provided the Property Appraiser's Office with a copy of a recorded legal description of the cutout which can also be located in Official Record Book ______ on Page ______.
 - I/We are requesting that a Metes and Bounds legal, Unplatted Subdivision Lot(s), or Partial Platted Subdivision Lot(s) be cutout. I/We have provided the Property Appraiser's Office with a copy of a recorded legal description of the cutout which can also be located in Official Record Book ______ on Page ______.



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OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE

By signing below, whether by the owner or the owner's representative, the owner acknowledges they have read and understand the aforementioned and availed themselves of the opportunity to ask any questions, seek clarification, or obtain additional information. A copy, signed by this office shall serve as proof that this request is being processed by the Property Appraiser's Office. The **processing time of 2 to 4 weeks** of this request should not hinder business matters (e.g. real estate closing).

If submitted and signed by a representative, a letter of authorization from the owner(s) must be included with this form.

Signature:	Date:		
Signature:	Date:		
Print Name:	Phone:		
Email Address:			
If the current owner(s) did not own the property as of Januar this request by signing below.	ry 1st, the prior owner(s) must authorize		
Signature:	Date:		
Signature:	Date:		
Please email completed form to gis@sjcpa.gov or fax to (904) 827-5580.			
Official Use ONLY – please do not write below.			
Receiving Deputy's Signature:	Date:		
Cut-Out Completed.	fective Year:		
Cut-Out Denied. Cut-Out cannot be processed for the following reas	con(s):		
Processing Deputy's Signature:	Date:		
EDDIE CREAMER, CFA, Property Appraiser			

4030 Lewis Speedway, Suite 203 • Saint Augustine, Florida 32084 • Phone (904) 827-5500 • Fax (904) 827-5580 • www.sjcpa.gov