



**CITY OF BALTIMORE
DEPARTMENT OF TRANSPORTATION
Right-of-Way Services Division
Property Location Section
The Councilman Harry S. Cummings Building
401 East Fayette Street, Suite 101
Baltimore, MD 21202**



CONSOLIDATION REQUEST

Property Location Section
Attn: Dawn Flanary
The Councilman Harry S. Cummings Bldg.
401 East Fayette Street, Suite 101
Baltimore, Maryland 21202
(410) 396-3800

Date: _____

Please consolidate my _____ Tax Lots into one so I may receive only one Tax Bill.

The properties are currently known as:

(Current Addresses) _____

The current Tax I.D. no.'s are: **Ward** _____ **Section** _____ **Block** _____ **Lots** _____

I am requesting the consolidated properties to now be known as: _____

I understand the properties requested to be consolidated into (1) tax lot, **must be owned in fee simple**, have title vested in the **same person, persons or corporation**, be **adjoining tax lots**, have **any and all municipal liens levied against any of the affected properties posted paid within the Bureau of Revenue Collections records**. In addition, the consolidation of the requested properties **must not violate any building code or zoning code**. It is further understood that the division of an existing tax lot or the re-establishment of a previously consolidated property into two (2) or more lots will require either a Subdivision or Minor Subdivision submission to the Department of Planning regardless if it is supported by Land Records or not.

A one-time administrative fee of \$80.00 is required to file the Consolidation Request. Your submitted Consolidation Request form must be accompanied by a check or money order in the amount of \$80.00 made payable to "Director of Finance". In addition, the Department of Finance requires a valid lien certificate to be obtained for each of the properties requested to be consolidated. The cost of a lien certificate is \$55.00 **per property**. You will need to order the lien sheets online through the payment portal at <https://pay.baltimorecity.gov/> Select Lien Certification.

<u>Agency Approvals</u>	
Property Location Section:	_____
Collections:	_____
Building Inspection:	_____ _____
Zoning:	_____ _____
(Please give explanation for denial)	

Please Print:

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Signature of Owner

(Please give explanation why this consolidation is occurring)
Example: Tax Purpose, Permit Filing, etc.

***NOTE: If you are making application by mail, please be sure to include all applicable fees as described above.
(NO REQUESTS FOR CONSOLIDATION WILL BE ACCEPTED MAY 1 THROUGH JULY 1)**

Received from: _____ Cash: _____ Check: _____ Money Order: _____ Exempt: _____

Amount: \$ _____ Received by: _____ Date: _____ Change Sheet: _____ Date: _____ New Lot # _____