

## CHANGE OF MAILING ADDRESS FORM

Note: This form must be fully completed and returned to the assessor's office to administer any change(s). Form must be signed by all parties or accompanied by a letter of authorization. Incomplete forms will not be accepted.

**ACCOUNT NUMBER(s)**  
(As shown on Notice of Value)

**UPC#(Parcel ID)**  
(As shown on Notice of Value)

**PHYSICAL ADDRESS**  
(As shown on Notice of Value)

_____	_____	_____
_____	_____	_____
_____	_____	_____

**Current Owner on Record** \_\_\_\_\_

or C/O \_\_\_\_\_

*Old Mailing Address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*New Mailing Address*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature(s):**

Owner or Agent: \_\_\_\_\_

Date: \_\_\_\_\_

Owner or Agent: \_\_\_\_\_

Date: \_\_\_\_\_

Owner Phone: \_\_\_\_\_

**Office Use Only**

**Received By:** \_\_\_\_\_  
Assessor's Staff

**Entered:**  Yes  No  
**Date** \_\_\_\_\_