

CHANGE OF MAILING ADDRESS
(PLEASE PRINT)

By submitting this form, you acknowledge you are the owner and authorize the Assessor's office to change the mailing address for this property.

Property Address: _____

Parcel Number: _____

New Mailing Address: _____

Date Move Effective: _____

Owner Name
(Please Print) _____

Owner
Signature _____

Date: _____