



CHANGE OF ADDRESS FORM

DATE: _____

As of November 1, 2007 our office will no longer change assessment addresses via telephone requests. We require the following:

1. COPY OF DRIVERS LICENSE OR A PICTURE ID.
2. PARCEL NUMBER ON WHICH ADDRESS IS TO BE CHANGED.
3. IF MORE THAN ONE TAX NOTICE IS GENERATED YOU MUST SUPPLY WHICH ONE MUST BE CHANGED.

Please provide us with the following information:

PARCEL #: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

ADDRESS: _____

PHONE NUMBER: _____

SIGNED: _____