

**REQUEST TO CHANGE MAILING ADDRESS  
FOR REAL ESTATE TAX BILL**

Parcel # \_\_\_\_\_ Parcel # \_\_\_\_\_

Parcel # \_\_\_\_\_ Parcel # \_\_\_\_\_

Current Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

To the offices of the \_\_\_\_\_ County Assessor,  
Auditor and Treasurer:

We hereby request that the mailing address for the above parcel(s) be  
changed to the following address for purposes of real estate tax billing:

New Mailing Address

\_\_\_\_\_

City, State, Zip

\_\_\_\_\_

Circle one:      Titleholder                      Contract Buyer  
                         Trustee                              Other \_\_\_\_\_

Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_

<b>For County Use Only</b>			
<b>Office where originated:</b>	<b>Auditor</b>	<b>Treasurer</b>	<b>Assessor</b>
<b>Employee</b> _____		<b>Date</b> _____	