

Tammie Guenthart Mariposa County Assessor 4982 10th St P.O. Box 35 Mariposa, CA 95338 Ph: (209) 966-2332 Fax: (209) 966-5719 tguenthart@mariposacounty.org Monday-Friday:8am-5pm

Add HOX 🗌 Remove HOX 🛛

CHANGE OF MAILING ADDRESS

Property assessment information and property tax bills are mailed to the current address of record on file with the County Assessor. Property owners are responsible for notifying the Assessor promptly whenever their mailing address has changed.

Assessment Number(s): (If Applicable) Property Owner: (Please Print) Last Name Middle Property Address: Street Address: City State Zip New Mailing Address as of/ (Date) Address 1 (or c/o) Address 2 City State Zip > This property has been: Sold Rented Neither > Was this your principal place of residence? Yes No > U/we vacated the property on (Date Moved):/ > I/we vacated the property location shown above as my principal place of residence; please remove any Homeowner's Exemption applied on my behalf for this location as of/ (Date Moved).
Last Name First Name Middle Property Address: Street Address Street Address Zip City State Zip New Mailing Address as of// (Date) Address 1 (or c/o) Address 2
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City State Zip New Mailing Address as of/(Date)
New Mailing Address as of/ (Date) Address 1 (or c/o) Address 2 City State This property has been: Sold □ No □ Was this your principal place of residence? Yes □ No □ I/we vacated the property on (Date Moved): // I no longer reside at the property location shown above as my principal place of residence; please remove any Homeowner's Exemption applied on my behalf for this location as of// (Date Moved).
Address 1 (or c/o) Address 2 City State Zip Mathematical State Zip Image: State Sold Rented Neither Image: Was this your principal place of residence? Yes No Image: Version of the property on (Date Moved):
Address 2 City State Zip This property has been: Sold Rented Neither Was this your principal place of residence? Yes No I/we vacated the property on (Date Moved): / I no longer reside at the property location shown above as my principal place of residence; please remove any Homeowner's Exemption applied on my behalf for this location as of/ (Date Moved).
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Property Owner or Agent: (Please Print)
Last Name First Name Middle
Signature Date
Email Address () Daytime Phone Number
ASSESSOR USE ONLY Add Change Delete

Date: _

Initials: ___