

## MARK CHURCH Assessor - County Clerk - Recorder

555 County Center, First Floor Redwood City, CA 94063-1665 Phone: (650) 363-4500 Fax: (650) 363-1903

email: assessor@smcacre.gov web: www.smcacre.gov

## **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.

| Assessor Parcel Number(s):           |                           |   |
|--------------------------------------|---------------------------|---|
| Assessment Number(s):(If Applicable) |                           |   |
| Property Owner: (Please              | Print)                    |   |
| Last Name Property Address:          | First Name                | Middle  |
| Street Address                       |                           |   |
| City                                 | State                     | Zip   |
| New Mailing Address as               | of/(Date)                 |   |
|                                      |                           |   |
| Address 1 (or c/o)                   |                           |   |
| Address 2                            |                           |   |
| City                                 | State                     | Zip   |
| ➤ This property has b                | peen:                     | Sold ☐ Rented ☐ Neither ☐   |
|                                      | cipal place of residence? | Yes □ No □  |
|                                      | roperty on (Date Moved):  |   |
| residence; please                    |                           | on above as my principal place of exemption applied on my behalf for ed). |
| Property Owner or Ager               | <b>t</b> : (Please Print) |   |
| Last Name                            | First Name                | Middle<br>/ /   |
| Signature                            |                           | Date  |
| Email Address                        |                           | ()<br>Daytime Phone Number  |
| ASSESSOR USE ONLY Initials: Date:    |                           | Add ☐ Change ☐ Delete ☐ Add HOX ☐ Remove HOX ☐                            |