

CHRISTINA WYNN SACRAMENTO COUNTY ASSESSOR

APPRAISAL SUPPORT SECTION 3636 American River Drive, Suite 200 Sacramento, CA 95864-5952 Phone (916) 875-0700 FAX (916) 875-0705 https://assessor.saccounty.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 First Name Property Address:	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 been:	Sold ☐ Rented ☐ Neither ☐
➤ Was this your principal place of resider	nce? Yes 🗆 No 🗆
▶ I/we vacated the property on (Date Mo	ved):/
☐ 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).	
Property Owner or Agent: (Please Print)	
Last Name First Name	Middle / /
Signature	
Email Address	Daytime Phone Number
ASSESSOR USE ONLY	Add ☐ Change ☐ Delete ☐
Initials: Date:	Add HOX ☐ Remove HOX ☐