

Joaquín Torres Assessor-Recorder 1 Dr. Carlton B. Goodlett Place City Hall - Room 190 San Francisco, CA 94102-4698

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 N Prop	ame First Name erty 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 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).		
Property Owner or Agent: (Please Print)		
Last Name First Name		Middle / /
Signature Date ()		
Email Address		Daytime Phone Number
ASSESSOR USE ONLY		Add Change Delete
Initials: Date: Add HOX		

