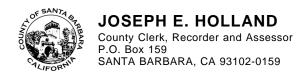
Change of Mailing Address Form



GENERAL INSTRUCTIONS

- Change of mailing address requests can only be accepted when signed by the property owner.
- Please include the parcel number (APN) or the address of the property owned.
- Complete and either:
 - ⇒ Fax to (805) 346-8324

OR

→ Mail to Assessor Office, 511 E. Lakeside Parkway, Suite 115, Santa Maria, CA 93455-1341

FOR PERMANENT CHANG	E OF ADDRESS (please	e print)	
OWNER'S NAME			PLEASE LIST ALL PARCELS AFFECTED BY THIS CHANGE
			ASSESSOR'S PARCEL NUMBER (APN)
PERMANENT MAILING ADDRESS			
CITY	CTATE	710 0005	
CITY	STATE	ZIP CODE	
OWNER'S SIGNATURE		DATE	
			REFER TO TAX BILL FOR PARCEL NUMBER
NOTE			

All information provided on this form is subject to verification.

IF YOUR CHANGE OF MAILING ADDRESS FORM IS INCOMPLETE, YOUR FORM MAY NOT BE PROCESSED.