

James B Rooney Assessor of Amador County

810 Court Street Jackson, CA 95642 PH: (209) 223-6351 FAX: (209) 223-6721

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)		
_	y Owner: (Please Print)	
Last Nam Propert	y Address:	Middle
Street Ad	dress	
City	State	Zip
New Mailing Address as of/(Date)		
A 11	1 ((-)	
Address 1	(or c/o)	
Address 2	2	
City	State	Zip
→ T	his pr <mark>operty has bee</mark> n:	Sold ☐ Rented ☐ Neither ☐
→ V	Vas this your principal place of residence?	Yes □ No □
→ 1/	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).		
Propert	y Owner or Agent: (Please Print)	
Last Nam	e First Name	Middle , , , ,
Signature		///////
Email Address		Daytime Phone Number
ASSE	ESSOR USE ONLY	Add ☐ Change ☐ Delete ☐
Initial	s: Date:	Add HOX ☐ Remove HOX ☐

