

**CHANGE OF MAILING ADDRESS**

**Keith Taylor**  
**Assessor of Ventura County**  
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(805) 654-2181 Fax (805) 645-1305  
[assessor.countyofventura.org](http://assessor.countyofventura.org)

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.

**Please print clearly or type in the fields below.**

**CHECK THE APPROPRIATE BOX:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> New Owner     | <input type="checkbox"/> Residential Property | <input type="checkbox"/> Business Property |
| <input type="checkbox"/> Boat/Aircraft | <input type="checkbox"/> Manufactured Home    | <input type="checkbox"/> Rural/Agriculture |

**SECTION 1: IDENTIFICATION OF PROPERTY**

\_\_\_\_\_  
PARCEL/I.D. NUMBER (XXX-X-XXX-XXX OR I.D. NUMBER)

\_\_\_\_\_  
ACCOUNT NUMBER IF APPLICABLE (XXX)

_____ PROPERTY LOCATION (SITUS/ADDRESS)	_____ CITY	_____ STATE	_____ ZIP CODE
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**SECTION 2: OWNER/PERSON REQUESTING CHANGE INFORMATION**

\_\_\_\_\_  
OWNER OF RECORD

\_\_\_\_\_  
DAYTIME TELEPHONE NUMBER

\_\_\_\_\_  
NAME OF PERSON REQUESTING CHANGE

\_\_\_\_\_  
EMAIL ADDRESS

\_\_\_\_\_  
SIGNATURE OF PERSON REQUESTING CHANGE (RELATIONSHIP)

\_\_\_\_\_  
DATE

**SECTION 3: MAILING ADDRESS CHANGE**

OLD MAILING ADDRESS:

_____ STREET ADDRESS	_____ CITY	_____ STATE	_____ ZIP CODE
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NEW MAILING ADDRESS AS OF \_\_\_\_/\_\_\_\_/\_\_\_\_ (Date):

_____ STREET ADDRESS	_____ CITY	_____ STATE	_____ ZIP CODE
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**FOR HOMEOWNER ONLY:**

- 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 the location as of \_\_\_\_/\_\_\_\_/\_\_\_\_ (Date Moved).