



**LARRY W. WARD
COUNTY OF RIVERSIDE
ASSESSOR-COUNTY CLERK-RECORDER**

Assessor
P.O. Box 12004
Riverside, CA 92502-2204
(951) 955-6200

Website: www.riversideacr.com
Portal: www.riversidetaxinfo.com

CHANGE OF MAILING ADDRESS FORM

GENERAL INSTRUCTIONS

- A change of mailing address request can only be accepted when signed by the property owner or agent.
- Complete the information below and either:
 - Fax to: (951) 955-0420
 - OR**
 - Mail to: Assessor's Office, Attn: Title Division, P.O. BOX 12004, Riverside, CA 92502-2204

(PLEASE LIST ALL PARCELS AFFECTED BY THIS CHANGE)

	*ASSESSOR'S PARCEL NUMBER (APN)									*PROPERTY ADDRESS (Street, City, State, Zip Code)				
APN				-				-						
APN				-				-						
APN				-				-						
APN				-				-						
APN				-				-						

***OWNER'S NAME:**

LAST NAME	FIRST NAME	MIDDLE
-----------	------------	--------

***NEW MAILING ADDRESS:**

STREET	CITY	STATE	ZIP CODE
--------	------	-------	----------

***OLD MAILING ADDRESS:**

STREET	CITY	STATE	ZIP CODE
--------	------	-------	----------



***PROPERTY OWNER/AGENT SIGNATURE**

PHONE

DATE

**Required Information*

If this request is from a legal entity (corporation, partnership, LLC, etc.) please do not use this form; submit your request on company stationery with the information listed above signed by a corporate officer.

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