

COUNTY OF SAN BENITO

TOM J. SLAVICH, ASSESSOR
1131 SAN FELIPE ROAD, HOLLISTER CA 95023
(831) 636-4030 FAX: (831) 636-4033

ADDRESS CHANGE AUTHORIZATION\*

\* This request can only be used to change the mailing address on the tax bill – not the owner's name.

Name \_\_\_\_\_

New Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ (Your phone # will be kept confidential and will only be used to contact you if we have any questions)

Parcel # (APN) of your property \_\_\_\_\_

(If you own more than one parcel, list all APN's that are affected)

Three pairs of horizontal lines for listing multiple APNs.

Do you have a boat assessed in San Benito County? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, provide the following information: CF or Document # \_\_\_\_\_

Do you have an aircraft assessed in San Benito County? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes provide the following information: N # \_\_\_\_\_

Do you have a business assessed in San Benito County? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes provide the following information: Account # \_\_\_\_\_

Name of Business \_\_\_\_\_

IF YOU ACQUIRED TITLE TO THIS PARCEL WITHIN THE LAST SIX MONTHS, PLEASE PROVIDE THE NAME OF THE FORMER OWNER:

\_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Return this completed form to:

San Benito County Assessors Office
1131 San Felipe Road
Hollister CA 95023