



# OFFICE OF THE SANTA FE COUNTY ASSESSOR

## Mailing Address Change

Location ID: \_\_\_\_\_

UPC: \_\_\_\_\_

Property Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_

I request that my mailing address be changed to:

\_\_\_\_\_

To be reflected on my property tax records with the County Assessor

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Assessor Employee Signature

\_\_\_\_\_  
Date:

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