

DAVID R. ANDERSON
Commissioner of the Revenue
101 E Main St Ste 201
Tazewell VA 24651-1071

REAL ESTATE AND/OR PERSONAL PROPERTY ADDRESS CHANGE REQUEST

I, _____, request that the address for my real estate and/or personal property be changed to the following:

MAILING ADDRESS

If real estate, please list name(s) that appears on your tax ticket, map numbers, and physical address:

NAME(S)	MAP NUMBER (see tax ticket: 1 st left hand line under description of property)	PHYSICAL ADDRESS
_____ / _____ / _____		
_____ / _____ / _____		
_____ / _____ / _____		

If personal property, please list social security number(s) & name vehicles are titled under:

1. _____ SS# for _____
2. _____ SS# for _____
3. _____ SS# for _____

My signature below certifies that I have the controlling interest in the real estate listed above or that I am the owner or co-owner of the vehicle(s) listed above and further certifies that I am responsible for the taxes.

Signature

Date

Telephone Number