



DOÑA ANA COUNTY
OFFICE OF THE ASSESSOR
845 N. MOTEL BLVD LAS CRUCES, NEW MEXICO 88007
Phone: (575) 647-7400 Fax: (575) 525-5538

CHANGE OF MAILING ADDRESS FORM

Note: THIS FORM MUST BE COMPLETED AND RETURNED TO THE ASSESSOR'S OFFICE. YOU MAY EITHER COME IN PERSON AND PRESENT YOUR DRIVER'S LICENSE OR ID, OR YOU CAN MAIL, FAX OR EMAIL THE COMPLETED FORM WITH THE NOTARIZED VERIFICATION BELOW.

PLEASE FILL OUT ALL SPACES BELOW, SIGN, DATE, AND RETURN THIS FORM TO THE ABOVE ADDRESS:

ACCOUNT NUMBER(S): _____

OWNER 1: _____ Mailing Address: _____

OWNER 2: _____ Mailing Address: _____

OWNER 3: _____ Mailing Address: _____

OWNER 4: _____ Mailing Address: _____

OWNER 5: _____ Mailing Address: _____

*Please list additional owners and mailing addresses on a separate page. Owner # to receive tax bill _____

c/o _____

SIGNATURE of OWNER MAKING CHANGE
(Or Legal Representative)
RELATIONSHIP TO OWNER: _____

For Office Use Only
LICENSE/ID VERIFIED: Yes ___ By: _____
DATE KEYED: _____
CLERK: _____

REQUIRED FOR MAILED, FAXED, OR EMAILED ADDRESS CHANGE REQUESTS IF DRIVER'S LICENSE IS NOT ATTACHED:

I hereby certify that I am the owner of the property associated with the Dona Ana County Assessor's account number(s) listed above.

Signature of owner

State of New Mexico
County of: _____

Signed or attested before me on this _____ day of _____, 20____, by _____.

SEAL

Notary Public

My commission expires