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Graham County

Assessors Use
ID Verified By

CHANGE OF ADDRESS FORM

Instructions- Form **must** be completed by **property owner**. For your protection we ask that you choose from the following options to complete form. 1.) If you are physically bringing this form into our office, please present a valid form of **photo identification**. 2.) If you will be returning by mail or scanned email *** you must have the form notarized. ***

1. Date Change Requested: _____
2. Name(s) of Property Owner(s): _____
3. **New** Mailing Address: _____

4. Phone: (____) _____ - _____ Cell (____) _____ - _____
5. Method of Request : In Person Mail* Email*
6. **Owner Signature** _____

7. Check **all** that apply below:

Parcel #	Primary Residence	Rental	Occupied by a Family Member	Vacant	Listed for Sale	Mobile on Property <i>If checked, complete the box below</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mobile Home Info:

- a. Mobile Home Make: _____
- b. Mobile Home Year: _____
- c. **Location address:** _____
- d. Roll#: _____ *and/or* Vehicle Identification#: _____