



**\*\* COUNTY TAX NOTICE ADDRESS CHANGE FORM \*\***

Treasurer/Recorder  
47 South Main Street  
Tooele, Utah 84074  
FAX 1-435-843-4732  
FAX 1-435-843-3276

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

Parcel Number (s): \_\_\_\_\_

Owner (s) of Record : \_\_\_\_\_

**Current mailing address  
of your Tax notice:**

**NEW name and address for the  
"in care of address"**

\_\_\_\_\_  
(Street Address and/or P.O. Box)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(City, State & Zip Code)

\_\_\_\_\_  
(Street Address and/or P.O. Box)

\_\_\_\_\_  
(City, State & Zip Code)

Reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Please sign and return to our office:  
You may either mail or fax  
to the above Address*

\_\_\_\_\_  
Signature of Owner Date

\_\_\_\_\_  
Please print your name

**For office personnel only**

This form was received:

In Person \_\_\_\_\_ Mail \_\_\_\_\_ Known \_\_\_\_\_ Fax \_\_\_\_\_ Return Receipt \_\_\_\_\_

Notes made in County Tax roll Yes / No

Scanned into a file Yes / No

Employees Initials \_\_\_\_\_