## CHANGE OF ADDRESS FORM

Please complete this form and have notarized. Return with required documentation as requested to:

## Mark A. Ward, Assessor of Property P.O.Box 446 Somerville, TN 38068

\*If you are the current owner of this property you may come in person to our office and have your address changed with a valid identification instead of completing this form.

			haraby doclars that I am
I, (Print name)			hereby declare that I am
the owner of the real prope	rty designated as Map	one of Office	_ Group
ParcelIn t	ne rayette County Tax Ass	sessor's Office	under penalty of perjuly
said statement is false.			the book of this form
*If you own multiple parcels	, please list all parcels to t	e changed on	the back of this form.
I am the		or an owner	oursuant to the attached
instrument (Deed, Will, Mar	riage or Divorce Certificate	e, Affidavit of I	leirship, Quit Claim, Powe
of Attorney, etc.)			
Please change name and add	dress to:		
Name:		A MARINE	
Address:			
City, State, Zip			
Phone No. (Required):			
Signature:			
	The state of the s		
Dated and signed this	day of		, 20
SWORN TO AND SUBSCRIBE	D before me, this the	day of	. 20
NOTARY PUBLIC	MY C	OMMISSION E	XPIRES