

DeSoto County Property Appraiser Office Address Change Form

PARCEL #: _____

DATE: _____

NAME OF PROPERTY OWNER: _____

C/O: _____

PHONE NUMBER: _____

OLD ADDRESS:

ADDRESS: _____ UNIT #: _____

CITY: _____ STATE: _____

ZIP CODE: _____

NEW ADDRESS:

ADDRESS: _____ UNIT #: _____

CITY: _____ STATE: _____

ZIP CODE: _____

Have you moved? _____ If no, what is the reason for the address change?

If yes, I will no longer qualify for homestead exemption for the current tax year.

Signature

Employee Initials: _____