|  |  |  |
| --- | --- | --- |
| **Change of Mailing Address** | **NOTE:**  | This form is for **mailing address change** only. |
|  | Date: |       |
|  | Real Estate / Account #: |       |
|  | Property Address: |       |
|  |       |
| Owner’s Name: |       |
| **PLEASE CHANGE MY MAILING ADDRESS ON THE TAX ROLL AS FOLLOWS:** |
| **Previous Mailing Address:** |       |
| City: |       | State: |       | Zip: |       |
| **Mailing Address Changed To:** |       |
| City: |       | State: |       | Zip: |       |
| Property’s Legal Description: | Lot |       | Block |       | Subdivision |       |
| Additional Legal Description: |       |
|       |
| **Does property currently have a homestead exemption:** |[ ]  **YES** |[ ]  **NO** |
| Owner’s Signature (Required\*\*): |       | Print Name: |       |
| Agent Signature\*\*: |       | Print Name: |       |
| *\*\*If signed by agent, owner’s signature is not required but a Letter of Authorization from the owner must accompany this form.* |
| **For NON-Homesteaded Properties, mail form to:** | **For Homesteaded Properties, mail form to:** |
| Duval County Property Appraiser231 E. Forsyth Street, Rm 230Jacksonville, Florida 32202 | Duval County Property Appraiser231 E. Forsyth Street, Rm 260Jacksonville, Florida 32202 |
| **Fax to: 904-255-5999** or**E-mail to:** **paolrec@coj.net** | **Fax to: 904-255-7963** or**E-mail to:** **pacompliance@coj.net** |
| Please provide contact information should you need to be reached. *(This data will not be entered on the tax roll.)* |
| Telephone: |       | E-mail: |       |
| Check box if you would like confirmation of the address change. |[ ]