BC Assessment

Change of Address Notification

* fields are mandatory

Property Identification:

*First Name _____ Middle Name _____ *Last/Company Name _____

*Assessment Roll Number

Area _____ Jurisdiction _____ Roll Number_____

Previous Mailing Address:

*Address 1 _____

Address 2 _____

*City _____ *Province/State _____ *Postal/Zip Code _____

*Country _____

New Mailing Address:

*Address 1 _____

Address 2 _____

*City _____ *Province/State _____ *Postal/Zip Code _____

*Country _____

*Phone _____ *Email Address _____

***Does this address change apply to all owners who currently have the same mailing address as you?** ☐ **Yes** ☐ **No**

***Do you own more than one property in British Columbia?** ☐ **Yes** ☐ **No**

If YES, list Assessment Roll Number(s) of other properties to which this change applies:

_____

_____

Would you like a reprint of your Assessment Notice? ☐ **Yes** ☐ **No**

I certify that the information provided in this change of address notification is true, accurate, and complete.

I understand that under section 70 of the *Assessment Authority Act*, a person who knowingly provides false or misleading information to BC Assessment commits an offence.

I have read and agree to the above conditions.

Signature _____ Date _____