

Honorable Dena R. Pittman
Hendry County Property Appraiser

ADDRESS CHANGE FORM

Parcel # _____

DATE _____

NAME OF PROPERTY OWNER _____

C/O _____

ADDRESS _____ UNIT # _____

CITY _____ STATE _____ ZIP _____

INFORMATION REC'D FROM:

NAME _____ PHONE _____

HAVE YOU MOVED? _____ IF NO, WHAT IS THE REASON FOR THE
ADDRESS CHANGE? _____

IF YES, WHAT IS THE DATE YOU MOVED? _____

IS THE PROPERTY RENTED? _____

I WILL NO LONGER QUALIFY FOR HOMESTEAD EXEMPTION FOR THE
_____ TAX YEAR.

SIGNATURE

PRINT

Please mail completed form to:
PO Box 1840
Labelle, FL 33975
You can fax the form to 863-675-5254

THIS FORM MUST BE SIGNED