



# LASALLE PARISH ASSESSOR

TOM KENDRICK, CLA - ASSESSOR

P.O. BOX 400 • 1050 COURTHOUSE ST. • JENA, LA 71342

PHONE: 318-992-8256 • FAX: 318-992-8257

## Change of Address Form

**Please use separate forms for multiple assessment numbers.**

Property Owner of Record: \_\_\_\_\_

Assessment #: \_\_\_\_\_

Property Address: \_\_\_\_\_

Property Description: \_\_\_\_\_

**I am requesting to change the mailing address for the above property.**

The NEW mailing address is as follows:

Care of Name (if applicable): \_\_\_\_\_

Street or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip (+4): \_\_\_\_\_

Reason for Change: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**The undersigned owner or legally authorized corporate officer / representative does hereby authorize the LaSalle Parish Assessor's office to change the mailing address on the above described account.**

\_\_\_\_\_  
Property Owner/Business Owner Signature      PRINT Name of person signing      Date

SWORN TO AND SUBSCRIBED Before Me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
at \_\_\_\_\_(city), \_\_\_\_\_(parish/county).

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Notary ID / Bar Roll #

Assessor's Office Use Only

Date Stamp Received

Date Processed \_\_\_\_\_ Employee Initials \_\_\_\_\_