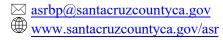


## COUNTY OF SANTA CRUZ SHERI THOMAS - ASSESSOR

BUSINESS PROPERTY DIVISION 701 Ocean Street, Room 130 Santa Cruz, CA 95060 **(831)** 454-2487



## **Business Property Account Update**

**Instructions**: Complete and return this form to the Office of the Assessor to report **changes** to your business. All sections must be completed.

Account Information		
Owner's Name:		
Business Name (DBA):		
Situs Address:		
Assessor's Account Number(s):		
Update Information		
Please check the appropriate box(es) be	elow and provide the previous	s and new business information.
☐ Business Name (DBA) Change		Effective Date:
Previous Name:	New Name:	
☐ Business Location Change		Effective Date:
Previous Location:		
☐ Mailing Address Change	☐ same as above	Effective Date:
Previous Address:		
New Address:		
Contact Information		
Contact Name:		Title:
Email Address:		Phone Number:
		on hereon, including any accompanying to the best of my knowledge and belief.
Authorized Signature	Printed Nar	ne Date Signed