

CLAY COUNTY ASSESSOR'S OFFICE

1 Courthouse Square Liberty, MO 64068-2390 Telephone 816/407-3500 FAX 816/407-3501

Tracy Baldwin, Clay County Assessor

Real Estate Mailing Address Change Form

Available online at: https://www.claycountymo.gov/departments/assessor

- PLEASE PRINT OR TYPE PLEASE USE AN ATTACHED LIST FOR MULTIPLE PARCELS
 - o IT MUST BE CLEAR WHAT PROPERTY(IES) THIS REQUEST APPLIES TO
- MUST BE COMPLETED BY **OWNER** OR OWNER'S **AUTHORIZED** REPRESENTATIVE
 - o AUTHORIZATION MUST BE IN WRITING AND PROVIDED CONCURRENTLY
- PRINT OR DOWNLOAD FORM AND RETURN TO OUR OFFICES
 - o FORM WILL BE REJECTED IF NOT FILLED OUT IN ITS ENTIRETY

Owne	er Name:					
	In Care Of Recipie	nt (optional):				
New	Mailing Address:	Name: In Care Of Recipient (optional): ailling Address: City: State: State: ZIP: In (Situs) Address of Real Estate: Number(s): (Property Account Number) Apply this change to all other parcels physically connected to this parcel which are listed under the same ownership (i.e., a single property but split into multiple parcels) Apply this change to all parcels in Clay County listed under the exact same ownership PAPINT: Relationship to Owner or Authorized Agent's Title: (Role or Position) Licertify that I am the owner of the above listed real estate parcel(s) located in Clay County, Missouri re: Date: (False statements made in this filling are subject to the penalties of a false declaration under § 575.060 RSMO) COMPLETE THIS FORM, AND WHEN COMPLETED SUBMIT VIA: IN PERSON, EMAIL, MAIL OR FAX: GIS/MAPPING 234 W. SHRADER ST. STE. D LIBERTY, MO 64068 816-407-3370				
	City:		State:	ZIP:		
Locat	ion (Situs) Address o	f Real Estate:				
Parce	el Number(s):					
		(Prope	erty Account N	Number)		
	☐ Apply this cha	nge to <u>all parcels</u> in Cla	y County listed	under the <i>exact</i> <u>same</u> ownership		
Daytime Phone:		Second Phone:				
Email	Address:					
Name	e (PRINT):					
	Relationship to Ov	vner or Authorized A	Agent's Title:			
	·		_	(Role or Position)		
	I certify that I am t	he owner of the above	e listed real est	ate parcel(s) located in Clay County, Missour		
Signa	ture:			Date:		
	(False statements mad	e in this filing are subject	to the penalties	of a false declaration under § 575.060 RSMo)		
PLEAS	SE COMPLETE THIS FO	ORM, AND WHEN CO	MPLETED SUI	BMIT VIA: IN PERSON, EMAIL, MAIL OR FA		
		GIS/MAPPING				
		•				
		FAX 816-407-3				
		gis@claycount	tymo.gov			
			County Use Only			

v.2.2/09012021 Date Received: _____