

IF YOU MOVE....

If at any time the property is sold or you change your primary residence, State law requires you to notify the Assessor within 30 days.

NOTICE OF MOVE Name: Moved from: Parcel Identification #: Date of Move: New Mailing Address: City: _____ State: ____ Zip: ____ Daytime Telephone including area code: _____ Owner's Signature Date Social Security Number

If there are additional owners, please attach a separate piece of paper with their dated signatures and social security numbers.

Please fax to 952-563-4741 or place in an envelope and mail:

Bloomington Assessor's Office 1800 W Old Shakopee Rd Bloomington MN 55431