



**Office of the Assessor**  
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## Mailing Address Change Form

<b>Date:</b>		<b>Tax Map Number:</b>	
<i>If more than one parcel, please use additional space at bottom</i>			
<b>Property Location</b>			
<b>Property Owner</b>			
<b>Daytime Phone Number</b>		<b>Email – If available</b>	
<b>Signature</b>	<b>Relationship to Owner</b>		

### New Mailing Address

<b>Street</b>			
<b>City</b>	<b>State</b>	<b>Zip</b>	

### Reason for Change

<b>Reason</b>			
<b>If a residence, is it occupied?</b>	<b>Occupant's Name</b>		

### Additional Parcels

<b>Tax Map Number</b>	<b>Location</b>
<b>Tax Map Number</b>	<b>Location</b>
<b>Tax Map Number</b>	<b>Location</b>
<b>Tax Map Number</b>	<b>Location</b>