JORDAN Z. MARKS
ASSESSOR/RECORDER/COUNTY CLERK
COUNTY OF SAN DIEGO
BUSINESS DIVISION
9225 CLAIREMONT MESA BLVD., SAN DIEGO, CA 92123-1211
858/505- 6100 * FAX 858/505-6266
www.sdarcc.gov

AFFIDAVIT OF SALE / LOSS / PERMANENT REMOVAL AND FOR REPORTING MAILING ADDRESS CHANGE

Description of Property ***In order for all changes to be made, you must supply the applicable account number***

Business Account Number: _____

Owner / Business Name / DBA: _____

Property Location _____

☐ Multiple Locations

* FOR CHANGING THE MAILING ADDRESS ON YOUR FUTURE TAX BILLS

☐ Business has moved to new address

Care of / Attention: _____

New Address: _____ Street _____ City _____ State _____ Zip

* TO REPORT A CHANGE IN OWNERSHIP

Sold To: _____ Date Sold: _____

Address: _____ Street _____ City _____ State _____ Zip

New Owner's Telephone Number ( ) _____

* IF PERMANENTLY REMOVED FROM THE COUNTY OF SAN DIEGO

☐ Permanently Closed ☐ Calamity

Date of Closure: _____

Comments:

I declare under penalty of perjury under the laws of the State of California that the above information, to the best of my knowledge and belief, is true, correct, and complete.

☐ Authorized Agent

_____ Signature _____ Date ( ) _____ Daytime Telephone No.

_____ Please print your name here _____ E-mail Address

The Assessor/Recorder/County Clerk reserves the right to request additional information or supporting documentation to complete this form.