Leslie Morgan Shasta County Assessor-Recorder 1450 Court St. Ste. 208-A Redding, CA 96001 Phone: (530) 225-3640

Fax: (530) 225-5673

PersonalProperty@shastacounty.gov

Business Assessment Update Form

If you have a change in the Assessee Name, DBA, or Mailing Address and/or status (Closed, Sold, or Moved) of your Business, please complete the following. Also, please include any documentation that will verify the information documented. If you need assistance in completing this form, please call (530) 225-3640.

Assessee Name:			Assessmen	t No.:	
DBA:					
Mailing Address:					
City / State / Zip:					
Telephone No.:					
Please list addition	onal assessments for r	nailing address change	::		
If applicable, plea	ase enter Date	Closed:	Date Sold:	Date Moved: _	
NOTE: If you Clo	sed, Sold, or Moved y	our business, change	s will be valid for the s	ubsequent lien date.	
If Closed , what d	id you do with the bu	siness equipment?			
If Sold,	Buyer's name:				
	Address:				
	City / State / Zip:				
If Moved,	New address:				
	City / State / Zip:				
Authorized signature:				Date:	
Printed name:				Title:	