



ROBERT MENVIELLE
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**PERSONAL PROPERTY
 STATEMENT OF CHANGE FORM**

(PLEASE PRINT)

Owner Name (as shown on tax bill) _____

Assessment No. _____

Fee Parcel: _____

Fill out the applicable section(s) below.

REQUEST FOR CHANGE OF MAILING ADDRESS

New mail address (street or P.O. box/city/state/ZIP): _____

STATEMENT OF CHANGE IN PROPERTY STATUS

Sold: Business Aircraft Vessel Other Personal Property

New owner's name: _____

D.B.A.: _____

New owner's mail address: _____ Telephone Number: _____

Date of Sale: _____ Selling Price: _____

Moved: Business Aircraft Vessel

Date moved: _____ New Location: _____

PERMANENTLY CLOSED BUSINESS

Date closed: _____

Disposition of assets: Sold Abandoned Junked Other: _____

NEW BUSINESS (Property statement filing is required)

STARTING DATE: _____

1. Owner name(s): _____

2. D.B.A.: _____

3. In care of or Attention (if applicable): _____

4. Mail address (street or P.O. box/city/state/ZIP): _____

5. E-mail address: _____

6. Location of property (street/city/ZIP): _____

7. Type of business: Retail Wholesale Manufacturing Service/Prof.

8. Business activity (describe): _____

Signature _____ **Date** _____ **Tel.** _____ **e-mail:** _____