**IF YOU MOVE….**

**If at any time the property is sold or you change your primary residence, State law requires you to notify the City 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

_____ _____
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.

Place in an envelope and mail or fax to:

City of Hopkins Assessor's Office
Attn: Homesteads
1010 1st St S
Hopkins, MN 55343
Fax # 952-935-1834

rrobertson@hopkinsmn.com
952-548-6310