



**Sierra County**  
**Office of the Assessor**

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MICHAEL D. HUSTON  
County Assessor

VIRGINIA G. WOMACK  
Chief Deputy Assessor

**Application for Mailing Address Change**

This form must be completed and returned to the Assessor's Office to change or amend your mailing address. No changes will be made if you do not complete and return this form.

ACCOUNT NUMBER	UNIFORM PROPERTY CODE

Property Owner's \_\_\_\_\_

Current Situs or Physical Address of Property : \_\_\_\_\_  
Street  
City State Zip

Daytime Phone Number: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Mailing Address Change To: \_\_\_\_\_  
Street  
City State Zip

X \_\_\_\_\_  
Signature of Assessed Owner or Agent\* Date

\*Enter relationship of Agent to Assessed Owner: \_\_\_\_\_

LIC/ID # of Agent \_\_\_\_\_

**For Office Use Only:**

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Updated By: \_\_\_\_\_ Date: \_\_\_\_\_