



Lara M. S. Overy
Commissioner

COMMISSIONER OF THE REVENUE
P.O. Box 245, Williamsburg, Virginia 23187
Phone (757) 220-6150
www.williamsburgva.gov



PERSONAL PROPERTY CHANGE OF INFORMATION

| TAXPAYER INFORMATION | | | |
|---|---------------------------|---------------|------------------|
| Name: | | SSN: | |
| Name: | | SSN: | |
| CHANGE OF NAME | | | |
| Previous Name: | | Current Name: | |
| CHANGE OF MAILING ADDRESS | | | |
| Old Address | | | |
| Street | | | |
| City | | State | Zip |
| New Address | | | |
| Street | | | |
| City | | State | Zip |
| PERSONAL PROPERTY SOLD/JUNKED/RELOCATED | | | |
| Vehicle Description | | | |
| Year | Make | Model | |
| VIN | | Title No. | License Plate |
| Date Vehicle Moved | New Garaging Jurisdiction | | Date Sold/Junked |
| Vehicle Description | | | |
| Year | Make | Model | |
| VIN | | Title No. | License Plate |
| Date Vehicle Moved | New Garaging Jurisdiction | | Date Sold/Junked |

DECLARATION: I declare that the information as listed above is true and correct to the best of my knowledge.

SIGNATURE: _____ DATE: _____
PHONE NUMBER: _____