



# IRVIN J. JOHNSON

Tax Commissioner  
DeKalb County, GA

Property Tax Division

Christy A. Huiel, Director

## MAILING ADDRESS CHANGE/MORTGAGE COMPANY REMOVAL

Date: \_\_\_\_\_ Parcel ID# / Account# \_\_\_\_\_

Name: \_\_\_\_\_

Power of Attorney: \_\_\_\_\_ YES (Proof Required) \_\_\_\_\_ NO

Telephone Number: \_\_\_\_\_  
(Area Code)

Fax Number: \_\_\_\_\_  
(Area Code)

Property Owner's Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Mail all Tax Information to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Remove Mortgage Company Information \_\_\_\_\_ YES \_\_\_\_\_ NO

Name of Mortgage Company: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Effective Date of Change: \_\_\_\_\_  
Month Day Year

Taxpayer's Signature: \_\_\_\_\_

Customer Service Representative: \_\_\_\_\_

Homestead Removed: \_\_\_\_\_

Date Processed: \_\_\_\_\_ Pin #: \_\_\_\_\_