

**FREDERICK COUNTY, VIRGINIA**

Commissioner of the Revenue
 P.O. Box 552, Winchester VA 22604-0552
 Phone: 540-665-5681 Fax: 540-667-6487
www.fcva.us/cor • www.fcva.us/persprop

**** OFFICE USE ONLY ****

Date FC Record Updated: _____

Initials: _____

PERSONAL PROPERTY ACCOUNT (VEHICLE) CHANGE OF ADDRESS (additional info on page 2)**USE THIS FORM IF YOU ARE: MOVING TO ANOTHER LOCATION HERE IN FREDERICK COUNTY**

- If your vehicle is currently registered and remaining in Frederick County but you are moving, in addition to completing this Change of Address notification, you will need to:
 Notify VA DMV of your address change (since Frederick County's account record will need to match that of DMV). You can go online to www.dmvnow.com OR call VA DMV (804.497.7100) to provide an agent with your "Move Date" and new address ("Garage Jurisdiction" should remain as Frederick County in DMV records) OR appear in person at a VA DMV Service Center and provide the information.

DO NOT USE THIS FORM IF YOU ARE: COMING IN NEW TO FREDERICK COUNTY

- If you are a new resident to Frederick County and wish to register your vehicle (*i.e.*, you do not currently have a Personal Property account with Frederick County), please either use our online program to [Add/Remove Vehicle Registration Request](#) and select "Register a New Vehicle" or complete our printable form "Add/Remove Vehicle Registration."

DO NOT USE THIS FORM IF YOU ARE: MOVING OUT OF FREDERICK COUNTY

- If you are now a former resident of Frederick County who has moved your vehicle out of Frederick County to another locality in the Commonwealth of Virginia (*e.g.*, City of Winchester, Warren County) or another State (*e.g.*, Maryland, Pennsylvania, Florida), please either use our online program to [Add/Remove Vehicle Registration Request](#) and select "Remove a Vehicle" or complete our printable form "Add/Remove Vehicle Registration."

SECTION 1 Personal Property Account Number(s) if known:

Primary Name on Account (<i>Last, First, Middle</i>):	Telephone No.:	Email Address:	Social Security No. or EIN:
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CURRENT (Old) ADDRESS on Account Record:**Address is [check one]:**

- Residence/Home Address (where you actually live)
 Mailing Address (where you receive your mail)
 Vehicle Location Address (location where vehicle is garaged or stored IF NOT AT RESIDENCE)

NEW ADDRESS to go on Account Record:**Address is [check one]:**

- Residence/Home Address (where you actually live)
 Mailing Address (where you receive your mail)
 Vehicle Location Address (location where vehicle is garaged or stored IF NOT AT RESIDENCE)

List all Additional Names (Co-Owners), if any, on Account Record:

- New Address applies to all Additional Names (Co-Owners) OR
 New Address DOES NOT apply to all Additional Names (Co-Owners)
 (see page 2)

Date of Move:**Address Change applies to [check one]:** all vehicles listed on Account OR only the vehicle(s) listed below:

YEAR	MAKE	MODEL	LAST 4 VIN	YEAR	MAKE	MODEL	LAST 4 VIN
mm/dd/yy							

Certification/Signature

The owner(s) must sign/submit this notification request. If the owner is a business entity such as a trust, partnership, limited liability company, or corporation, it must be signed/submitted by a member, partner, executive officer, or other person specifically authorized in writing by the trust, partnership, limited liability company, or corporation to sign/submit. *It is a misdemeanor for any person to willfully subscribe a return which is not believed to be true and correct as to every material matter.* (Code Va. Sec. 58.1-11)

I declare, under penalty of perjury, (1) that the foregoing information is complete, true, and correct to the best of my knowledge and belief, and (2) that I am the owner or a member, partner, executive officer, or other person specifically authorized in writing to sign.

 Owner OR If Business, Title: _____

Signature

Print Name

(e.g., President, VP etc.)

Date

Additional Signature

Print Name

 Co-Owner

Date

Additional Signature

Print Name

 Co-Owner

Date

PERSONAL PROPERTY ACCOUNT (VEHICLE) CHANGE OF ADDRESS (continued)

SECTION 2	If New Address does NOT apply to all Additional Names (Co-Owners) on Account, provide the following information:						
Additional Name (Co-Owner) on Account (Last, First, Middle):				Telephone No.:	Email Address:		Social Security No. or EIN:
NEW ADDRESS to go on Account Record:				Address is [check one]:			
				<input type="checkbox"/> Residence/Home Address (where you actually lived) <input type="checkbox"/> Mailing Address (where you received your mail) <input type="checkbox"/> Vehicle Location Address (location where vehicle was garaged or stored IF NOT AT RESIDENCE)			
Co-OWNER NEW ADDRESS applies to the following vehicle(s):							
YEAR	MAKE	MODEL	LAST 4 VIN	YEAR	MAKE	MODEL	LAST 4 VIN
Additional Name (Co-Owner) on Account (Last, First, Middle):				Telephone No.:	Email Address:		Social Security No. or EIN:
NEW ADDRESS to go on Account Record:				Address was [check one]:			
				<input type="checkbox"/> Residence/Home Address (where you actually lived) <input type="checkbox"/> Mailing Address (where you received your mail) <input type="checkbox"/> Vehicle Location Address (location where vehicle was garaged or stored IF NOT AT RESIDENCE)			
Co-OWNER NEW ADDRESS applies to the following vehicle(s):							
YEAR	MAKE	MODEL	LAST 4 VIN	YEAR	MAKE	MODEL	LAST 4 VIN

SECTION 3	Complete ONLY IF a second new address should be noted on account record (e.g., physical address different from mailing address so both are recorded)						
Second New Address to go on Account Record:				Address is [check one]:			
				<input type="checkbox"/> Residence/Home Address (where you actually live) <input type="checkbox"/> Mailing Address (where you receive your mail) <input type="checkbox"/> Vehicle Location Address (location where vehicle is garaged or stored IF NOT AT RESIDENCE)			
Second New Address applies to [check all that apply]: <input type="checkbox"/> Primary Name on Account <input type="checkbox"/> Co-Owners							

Your Change of Address request is subject to review by the Commissioner of the Revenue. Further action may be required on your part before the Commissioner's office can proceed.