

COUNTY OF SANTA CRUZ
SHERI THOMAS □ **ASSESSOR**
BUSINESS PROPERTY DIVISION 701
Ocean Street, Room 130
Santa Cruz, CA 95060

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🌐 www.co.santa-cruz.ca.us/asr

Personal Property Account Closure

Instructions: Complete and return this form to the Office of the Assessor to request **closure** of an existing personal property account. All sections must be completed. The sale, removal or destruction of property after lien date (January 1) does not relieve the owner on January 1 of tax liability.

Account Information

Owner's Name: _____

Vessel or Aircraft Number: _____

Assessor's Account Number(s): _____

Closure Information

Please check the appropriate box below and provide all requested information.

Craft was sold

Date of Sale: _____ Sale Price: \$ _____

New Owner Name: _____

Mailing Address: _____

Craft was wrecked, destroyed, stolen, abandoned, etc.

Date of Occurrence: _____

Craft was permanently moved outside of Santa Cruz County

Date of Move: _____

New Location (including Zip Code): _____

Contact Information

Contact Name: _____ Title: _____

Email Address: _____ Phone Number: _____

I certify (or declare) that the foregoing and all information hereon, including any accompanying statements or documents, is true, correct and complete to the best of my knowledge and belief.



Authorized Signature

Printed Name

Date Signed