TAX APPRAISAL DISTRICT



General Request Form

Appraisal District use only:	
Date Received:	Date Entered:
Deputy:	Deputy:
☐ Address Change	☐ Contract of Sale/Contract for Deed
☐ Last Name Change by Marriage License	☐ Unrecorded Warranty Deed/Quitclaim Deed
□ Name Change by Divorce Decree	☐ Legal Description update by New Survey
☐ Information Update by Death Certificate	☐ Inherited by Probated will
	☐ Inherited by filed Affidavit of Heirship
I	, request the above checked information
To be updated on the property identification nur	<u> </u>
	()
Signature	 Date
Property IDs:	
New Owner Name:	Phone Number:
Address:	
City:	
State:	
Zip:	

(Ver:2.0) BELTON (254)939-5841 KILLEEN (254)634-9752 TEMPLE (254)771-1108