

## **Department of Assessment**

Office: (541) 766-6855 Fax: (541) 766-6398

> PO BOX 3020 Corvallis, OR 97339

co.benton.or.us/assessment

## REQUEST FOR CHANGE OF OWNERSHIP BY WAY OF AN UN-RECORDED DOCUMENT \$50.00 Application Fee

Map & Tax Lot No.	
Accou	nt #(s)
Owne	r(s) on OUR Records:
It is I	equested that the ABOVE DESCRIBED PROPERTY be listed in the following Name(s):
BY VI	RTUE OF THE FOLLOWING:
	Death of spouse or individual owning by "right of survivorship", "husband & wife", "tenants by the entirety", etc.
	OR Death of life estate holder (**Either situation requires a copy of a Death Certificate) Date of death:County:
	Probate Court Order of Final Distribution Probate No:(please provide copy of probate pertaining to property distribution)
	Property conveyed by Court Order in Divorce or Civil Action Divorce Decree No Circuit Court Case No (Please provide copy of decree or property settlement agreement pertaining to property distribution)
	Legal name change Circuit Court Case No (Requires copy of Circuit Court Case document)
	Change to/from married name (Requires copy of Marriage cert or Divorce decree)
	Change of Trustee on Trust (Requires copy of changed Trustee portion of Trust)
	Other
Reque	sted by:
	(print name) (signature)
** <u>Na</u> TAXP clerk' MAY	ne Changes:  AYER ALSO UNDERSTANDS THAT ANY UNRECORDED DOCUMENTS (not recorded at the county office) SUBMITTED HEREWITH ARE BEING PROCESSED FOR ASSESSMENT RECORDS ONLY AND SE SUBJECT TO FURTHER REQUIREMENTS BY OTHER OFFICES TO BE RECORDED ON THE PUBLIC FOR CONSTRUCTIVE NOTICE TO THIRD PARTIES IN FUTURE TRANSACTIONS.  S: Date: