GUADALUPE APPRAISAL DISTRICT
CHANGE REQUEST

Seguin Office (Main)
3000 N Austin St
Seguin, TX 78155
(830) 372-2871 or (830) 303-3313
FAX: 830-372-2874
gadprotest@guadalupead.org

Schertz Substation
1052 FM 78 * Ste 103
Schertz, TX 78154
(210) 945-9708 Opt. 8
FAX: 877-254-0888

Please Print:
GEO #(S) OR PID #(S): ______________________________________________________________________________________

Legal Description: ____________________________________________________________________________________________

Situs (Location) Address: ______________________________________________________________________________________

Current Property Owner’s Name: ______________________________________________________________________________

Current Mailing Address: ______________________________________________________________________________________

Previous Property Owner’s Name: ______________________________________________________________________________

Daytime Phone number (work/cell): __________________________ E-Mail Address: __________________________

TYPE OF CHANGE (Mark with a check) REQUIRED DOCUMENTATION (Must be attached to this request)
___ Owner name correction (spelling only) Deed with owner’s name AND current Driver’s License
___ Owner name change Deed, SOL, affidavit of MH ownership, or name change certificate AND Driver’s License
___ C/O Address Verified Bill of Sale/Statement of Fact Owner’s Request
___ Addition of name Recorded or unrecorded deed with all owner’s names
___ Ownership Update Copy of death certification, last will AND Driver’s License.
___ Ownership change Recorded or unrecorded Deed or Mobile Home title (SOL)/Mobile Home Affidavit
___ Marriage/Divorce Marriage certificate AND driver’s license OR divorce decree AND driver’s license (C/O for Tax Purposes Only)
___ Owner name change-Contract of Sale Copy of signed contract of sale
___ Add or Remove (Circle One) Mortgage Code Mortgage Company Address: __________________________
___ Acreage correction Copy of Deed and survey to include metes & bounds description
___ Combine* Attach appraisal cards AND verify structures, entities and liens (if any)
___ Split Accounts* Attach appraisal cards, & verify location of structures.

*Splits and combines require the same ownership, contiguous property, as well as the same taxing jurisdictions

Comments: ________________________________________________________________________________________________

__________________________________________________________________________________________________________

Due to this change request, if the above referenced property is your Residential Homestead for property tax
purposes, please complete the following: Is the above referenced property still your primary residence? ___ YES: If
YES, please complete an updated Homestead Application and attach. / GAD use only: Updated HS Recv’d? ___/___
___ NO: If NO, please complete a Request for Cancellations of Exemptions & list the date the property ceased being
your primary residence ___/___/___ (Month/Day/Year)

The above information will be used for determining continued qualification for the residential homestead exemption for property
tax purposes. The appraisal district records reflect names, addresses and legal descriptions from the last recorded legal
document. Any person who knowingly makes a false statement on this request shall be subject to the penalties of a Class A
misdemeanor or a felony of the third degree as set forth in Section 37.10 of the Texas Penal Code. I solemnly swear or affirm that
the above information is true and correct to the best of my knowledge and officially request that these changes to be made to the
appraisal roll.

Signature of Property Owner/Agent __________________________ Date ______________ Received by: G.A.D. Staff Name

3/25/2020