

FERRY COUNTY ASSESSOR
AFFIDAVIT OF NAME CHANGE

PLEASE COMPLETE ONLY THOSE SECTIONS THAT APPLY

I am submitting a name change for the following parcel of land situated in Ferry County, Washington, for the following reason(s):

Date: _____

Parcel No: _____

Reason for Change: _____

STATEMENT TO CORRECT MISPELLED NAME (Please TYPE or PRINT)
The correct spelling of my name is: _____
Last First Middle

STATEMENT OF ONE AND THE SAME PERSON (Please TYPE or PRINT)
I, _____
Last First Middle
and, _____
Last First Middle
are one and the same person.

CHANGE OF NAME – INDIVIDUAL ONLY (Please TYPE or PRINT)
From: _____
Last First Middle
To: _____
Last First Middle
REASON FOR NAME CHANGE: _____ _____

