

CHANGE OF ADDRESS FORM

Please mail to:
AAM, LLC
1600 W. Broadway Rd., Suite 200
Tempe, AZ 85282
Phone: 602-957-9191
Fax: 602-870-8231
Email: aamaddresschanges@aamaz.com

Please complete the following information and return this form within 14 days of receipt via US Mail or fax; or you can visit us online at www.AAMAZ.com by clicking on "Homeowner Resources," followed by "Change of Address" and follow the instructions. This form has been sent to a possible alternate address or has been sent at your request. We are unable to change your mailing address without this form being completed.

All information is kept confidential.

Owner Name _____

Community Name _____ Lot# _____

**Property Address _____

City _____, State _____ Zip Code _____

Daytime phone _____

Evening Phone _____

Cell Phone _____

If you do not reside at the property address above, please provide alternate mailing address below:

City _____ State _____ Zip Code _____

E-mail address _____

If you are not living in the property, would you like compliance/violation notices mailed to the property address as well as the alternate address provided above?

Yes _____ No _____

Signature _____ Date _____

**** All correspondence will be sent to the property address unless we are notified of an alternate mailing address. In the future, if you wish to change your mailing address, please submit your request in writing to the address above.**

Thank you for your cooperation!