

**ARIZONA FORM**  
**822**

**Change of Address**  
*Please type or print.*

EFFECTIVE DATE  
\_\_\_\_\_

Use this form to notify the Arizona Department of Revenue of a change in your mailing address. Submit separate forms for home and business addresses.

Check each box for the forms affected by this change:

- 1  Individual income tax returns (Arizona Forms 140, 140A, 140EZ, 140PY, 140NR, 140PTC, 141AZ)  
 If your last return was a joint return and you are now establishing a residence separate from the spouse with whom you filed that return; check here.
- 2  Business returns (Arizona Forms 99, 99T, 120, 120A, 120S, 141AZ, 165)
- 3  Estate or generation-skipping transfer tax returns (Arizona Forms 76, 72)

|  |                                    |
|--|------------------------------------|
| 4a Name (first name, initial, and last name for individual)                        | 4b Your Social Security Number     |
|  | 4c Employer Identification Number  |
| 5a Spouse's Name (first name, initial, and last name)                              | 5b Spouse's Social Security Number |
| 6 Prior Name (Complete this line if the name(s) is/are changed since last filing.) |                                    |

|  |  |
|--|--|
| 7a Old Address (Number, street, apt./suite number or PO Box Number)  | 7b Spouse's Old Address (Number, street, apt./suite number or PO Box Number)<br><i>Complete line 7b only if different from address on line 7a.</i> |
| City, town or post office, state, ZIP Code<br><i>(If a foreign address, city, province/state, postal code, and country.)</i> | City, town or post office, state, ZIP Code<br><i>(If a foreign address, city, province/state, postal code, and country.)</i>                       |

8 New Address (Number, street, apt./suite number or PO Box Number)

\_\_\_\_\_  
City, town or post office, state, ZIP Code *(If a foreign address, city, province/state, postal code, and country.)*

|                         |                         |                             |
|-------------------------|-------------------------|-----------------------------|
| <b>PLEASE SIGN HERE</b> | _____<br>Your Signature | _____<br>Spouse's Signature |
|                         | _____<br>Date           | _____<br>Date               |

**Mail to:** Arizona Department of Revenue, 1600 W Monroe, Phoenix AZ 85007-2650