



Office of the Board of Assessors  
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Edward A. Holland, Jr.  
Chairperson

Donald W. Howes

Matthew M. Dailey

## REQUEST TO CHANGE MAILING ADDRESS

Real Estate

Personal Property

Today's Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address of subject property: \_\_\_\_\_

Current mailing address: \_\_\_\_\_

Requested mailing address: \_\_\_\_\_

Do you own the property: Yes \_\_\_\_\_ No \_\_\_\_\_

If No, state your authorization: \_\_\_\_\_

Your signature: \_\_\_\_\_

Contact phone number: \_\_\_\_\_

Contact email address: \_\_\_\_\_

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(To be completed by Assessors' Office)

Date Completed: \_\_\_\_\_

Completed by: \_\_\_\_\_

Property Parcel ID #: \_\_\_\_\_ Map: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_

Personal Property Account #: \_\_\_\_\_