

REPORT OF CHANGE OF MAILING ADDRESS
FOR PROPERTY TAX BILLS

DATE: _____

BILL #: _____

ADDRESS OF PROPERTY: _____

OWNER OF PROPERTY: _____

SECTION: _____

BLOCK: _____

LOT(S): _____

FORMER MAILING
ADDRESS (BANK, ETC.): _____

SEND TAX BILLS TO: _____

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REASON:

_____	CHANGE OF BANKING INSTITUTION
_____	MORTGAGE SATISFACTION
_____	NEW OWNER
_____	NEW MAILING ADDRESS

SIGNATURE:

TELEPHONE NUMBER:
