



Dear Property Owner,

Please indicate your mailing address preference by checking off all box(es) that apply.
 Please call our office with any questions you might have.

Motor Vehicle	<input type="checkbox"/>	Personal Property	<input type="checkbox"/>
Sewer	<input type="checkbox"/>	Real Estate	<input type="checkbox"/>

PLEASE PRINT

Owner: _____

Property Location: _____

MAILING ADDRESS CHANGE

OLD/ Current Mailing:

Street: _____

Town, State, Zip: _____

NEW Mailing:

Street: _____

Town, State, Zip: _____

Signature: _____ **Date:** _____

Print Name: _____