

OTSEGO COUNTY ADDRESS CHANGE FORM

Use this form to report a permanent change of address.

Temporary address changes should be done through the United States Postal Service. Information submitted will be used to change the address for all tax billing and assessment rolls. During certain times of the year a delay may be experienced if the "Tax Billing File" has already been produced.

Today's Date:	<input style="width: 95%;" type="text"/>
Town of:	<input style="width: 95%;" type="text"/> <input style="float: right; width: 20px; height: 20px;" type="checkbox"/>
Property Location:	<input style="width: 95%;" type="text"/>
Tax Map Number:	<input style="width: 95%;" type="text"/>
Name of Owner:	<input style="width: 95%;" type="text"/>
New Address:	<input style="width: 95%;" type="text"/>
City, State, Zip:	<input style="width: 95%;" type="text"/>
Telephone Number:	<input style="width: 95%;" type="text"/>
Email Address:	<input style="width: 95%;" type="text"/>

I, _____ certify that I am the owner, or legal representative of the owner, of/for the above mentioned property, and I have the authority to request this change of address.

RETURN COMPLETED FORM TO:

Signature of Owner or Legal Representative

YOUR LOCAL ASSESSOR or

OTSEGO COUNTY REAL PROPERTY TAX SERVICE
197 MAIN ST
COOPERSTOWN NY 13326



SPACE BELOW FOR ASSESSOR OR RPTS DEPARTMENT USE

DATE RECEIVED: _____
Assessor RPTSA

[] Entered in RPS