



# Department of Assessment

## Change of Mailing Address Form

Department of Assessment  
1 Kennedy Plaza, Utica, New York 13502  
Phone: (315)792-0125  
Fax: (315)792-9028

**DAVID R. ROEFARO**  
MAYOR

**DAVID H. WILLIAMS**  
ASSESSOR

PLEASE COMPLETE THIS FORM, SIGN AND RETURN AS SOON AS POSSIBLE TO:

**Department of Assessment**  
**1 Kennedy Plaza, Utica, New York 13502**

CHANGE OF MAILING ADDRESS EFFECTIVE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

TAX MAP# \_\_\_\_\_  
(IF KNOWN)

OLD BILLING ADDRESS: \_\_\_\_\_

NEW BILLING ADDRESS: \_\_\_\_\_

PLEASE CHECK HERE IF THIS IS YOUR PRIMARY RESIDENCE.

TELEPHONE#: \_\_\_\_\_  
(REQUIRED)

**NOTE:** TAX BILLS MAY HAVE BEEN PRINTED PRIOR TO THIS REQUEST. IT IS THE PROPERTY OWNER'S RESPONSIBILITY TO CALL THE COMPTROLLERS OFFICE AT **315-792-0147** FOR TAX BILL AMOUNTS.

PROPERTY OWNER'S SIGNATURE (REQUIRED)

DATE

WARD \_\_\_\_\_

KEY \_\_\_\_\_