



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

ROBERT M. PALMIERI
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 THE **NEW BILLING ADDRESS** 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 OR OWNER'S REPRESENTATIVE SIGNATURE (REQUIRED)

DATE

WARD _____

KEY _____