



James H. Elrod, MMAO, PPE, Assessor • Beth Schwartz, MMAO, PPE, Assistant Assessor

REQUEST FOR CHANGE OF NAME OR MAILING ADDRESS

***** SUBMISSION OF THIS FORM DOES NOT GUARANTEE A CHANGE WILL OCCUR.
THE ASSESSING DEPARTMENT MAY REQUIRE ADDITIONAL INFORMATION OR DOCUMENTATION. *****

Please complete the form in its entirety, attach any required documentation, and return to the Assessing Department.

The information provided below will be used solely for township correspondence and public record purposes such as name and mailing address for assessment change notices, property tax bills, etc. This form does not impact or update legal ownership, title history, U.S. Postal Service mailing address, or the mailing address for water billing; please contact Public Services at 586-286-9300 for water billing.

All property owners on record must sign this form, including all LLC members or partners. If the property owner wishes a non-owner (for example, land contract seller, management company, or tenant) to receive mail/notices on their behalf then the owner must make the request by signing and submitting this form *or* the non-owner must submit a signed authorization from the owner along with this form. For name changes please submit legal documentation such as a marriage license, divorce judgment, death certificate, or court order *along with* a copy of a driver's license or ID displaying the revised name.

PROPERTY INFORMATION	
PARCEL ID #:	16 - 11- _____ - _____ - _____
PROPERTY ADDRESS:	_____
PROPERTY OWNER(S):	_____

NEW NAME AND/OR MAILING ADDRESS INFORMATION	
NAME (CHANGE TO):	_____
MAILING ADDRESS (CHANGE TO):	_____ _____
REASON FOR CHANGE:	_____

NAME (PLEASE PRINT): _____ PHONE NUMBER: _____

EMAIL: _____

SIGNATURE: _____ DATE: _____