

**LEWIS COUNTY ASSESSOR'S OFFICE
CHANGE OF ADDRESS FORM**

Old Address:

Name: _____
Address: _____

Phone Number: _____

New Address:

Name: _____
Address: _____

Phone Number: _____

Address needs changed on the following property:

Real Estate and/or Minerals			
Ticket #	District	Map #	Parcel #

Personal Property Account Number(s)

I certify that I am the owner of this property or have the legal power of attorney of the owner to request the tax bill address change.

Signature: _____

Date: _____

Deputy who made change: _____