

Parcel ID# _____ - _____ - _____ - _____

CHANGE OF ADDRESS NOTIFICATION

BEFORE WE CAN COMPLY WITH YOUR REQUEST TO CHANGE THE MAILING ADDRESS, THIS FORM MUST BE COMPLETED AND RETURNED TO THE ADDRESS BELOW AS SOON AS POSSIBLE.

City of Lincoln Park

Office of the Assessor

1355 Southfield Road
Lincoln Park, MI 48146
(313) 386-1800, Ext. 1239
Email: lrowley@citylp.com

I state that I am the owner or have the legal right to make decisions regarding the property at:

***Property Address** _____ **Lincoln Park, MI**

(If you have multiple Properties/Parcels please include all Addresses and/or Parcel ID #'s)

I would like all correspondences sent from the Lincoln Park Assessor's office to the following:

***NAME (person whose address bills will be sent)** _____

***ADDRESS** _____

***CITY** _____

***STATE** _____ ***ZIP CODE** _____

***DAYTIME PHONE #** _____

***FOR THE FOLLOWING REASON(S)**

Also, if the owner is not living at this property, the Principal Residence must be Rescinded.

***Signed** _____ **Date** _____

(If you have Power of Attorney, or legal rights please attach a copy of the document showing this)

***Before we can change the mailing address of any property,**

This form MUST be COMPLETED