

Town of Coventry Tax Assessor's Office

ADDRESS CHANGE REQUEST

In order to keep an up to date record of your current address for Tax records, please fill out this form. It will be kept on file in our office for a period of one year. If you should move or change your address within the year, you will be required to fill out another form.

DATE OF CHANGE: _____

NAME: _____

OLD ADDRESS: _____

NEW ADDRESS:

STREET NAME & NUMBER: _____

PO BOX: _____

CITY _____ STATE _____ ZIP CODE _____

SIGNATURE: _____ DATE: _____

TAX ASSESSOR'S USE ONLY

RP ACCOUNT NUMBER _____

MV ACCOUNT NUMBER _____

PROPERTY LOCATION _____

PLAT _____ LOT _____ MOTOR VEHICLE _____

PLAT _____ LOT _____ MOTOR VEHICLE _____

PLAT _____ LOT _____ MOTOR VEHICLE _____

TELEPHONE: _____ TAKEN BY: _____ DATE: _____

REQUESTED BY: _____