



CHANGE OF MAILING ADDRESS - REAL ESTATE/SEWER

COMPLETION OF THIS FORM WILL CHANGE THE MAILING ADDRESS ON FILE WITH THE CITY OF CRANSTON. FUTURE TAX BILLS WILL BE MAILED TO THE NEW LOCATION THE FOLLOWING BILLING CYCLE (IF LENDER RECEIVES BILL DIRECTLY, THEY WILL CONTINUE TO DO SO). CHANGING THE MAILING INFORMATION CAN NOT AND WILL NOT CHANGE THE OWNERSHIP. REQUEST DOES NOT ISSUE BILL COPY.

TO BE COMPLETED BY PROPERTY OWNER, POA. OR REGISTERED AGENT/REPRESENTATIVE ONLY. (POA SHOULD INDICATE A "CARE OF" ON NEW ADDRESS LINE). *ALL NON-OWNERS ARE TO PROVIDE PROOF OF LEGAL REPRESENTATION FOR OWNER. FILER'S LICENSE INFORMATION IS REQUIRED.

PLEASE FILL OUT COMPLETELY & PRINT CLEARLY

RETURN FORM TO: 869 PARK AVE, CRANSTON, RI 02910 / BSMITH@CRANSTONRI.GOV / F 401.780.3361

PROPERTY LOCATION: _____

PROPERTY OWNER(S): _____

NEW MAILING ADDRESS: _____

TODAY'S DATE: ____/____/____

***THE FOLLOWING IS FOR PRIVATE USE ONLY**

PRINTED NAME: _____

SIGNATURE: _____

LICENSE STATE: _____ LICENSE NUMBER: _____

PHONE NUMBER: _____ EMAIL: _____

FOR OFFICE USE/OPTIONAL

PLAT: _____ LOTS: _____

PLAT: _____ LOTS: _____

PLAT: _____ LOTS: _____

PLAT: _____ LOTS: _____

PLAT: _____ LOTS: _____

PLAT: _____ LOTS: _____