HON. Alex B. Morse

MAYOR

BOARD OF ASSESSORS

ANTHONY DULUDE, MAA, Chief Assessor
DEBORAH BRUNELLE MAA, Assessor

ADDRESS CHANGE REQUEST FORM

COMPLETE THE FORM AND SEND TO:
Holyoke Board of Assessors
536 Dwight Street Room 4
Holyoke, MA 01040

PLEASE TYPE OR PRINT CLEARLY

PARCEL ID: _____

OWNER NAME: _____

PROPERTY LOCATION: _____

NEW MAILING ADDRESS: _____

PLEASE INCLUDE ZIP CODE: _____

EFFECTIVE DATE: _____

_____
Signature of person requesting change DATE

_____
PRINT NAME

REMEMBER TO NOTIFY THE REGISTRY OF MOTOR VEHICLES OF YOUR NEW ADDRESS FOR BOTH YOUR DRIVER'S LICENSE AND REGISTRATION

CITY OF HOLYOKE
536 DWIGHT ST. STE. 4 HOLYOKE, MASSACHUSETTS 01040
PHONE: (413) 322-5550 FAX: (413) 322-5551