ADDRESS CHANGE FORM
For Assessing Records and Tax Bills ONLY

PLEASE PRINT

DATE: ________________________________

LOCATION OF PROPERTY: ________________________________

PROPERTY ID #: ____________________________________________

OWNER NAME(S): ____________________________________________

__________________________________________________________

CHANGE MAILING ADDRESS FROM:

________________________________________________________________

________________________________________________________________

________________________________________________________________

CHANGE MAILING ADDRESS TO:

________________________________________________________________

________________________________________________________________

________________________________________________________________

SIGNATURE: ________________________________________________

Please return this form to the Assessing Department by hand delivery, mail, fax or email.

Town of Thornton • Assessing Department
16 Merrill Access Road • Thornton, NH 03285
Phone: 603.726.8168
Fax: 603.726.2078
Email: bkassessing@thorntonnh.org