

Town of Corinth

~ASSESSMENT
DEPARTMENT~
600 Palmer Ave
Corinth, NY 12822
Telephone 518-654-9232 x 5

CHANGE OF ADDRESS REQUEST FORM
(Only the owner can submit)

Owner of Record

Tax Parcel ID #

Phone Number

Address of Property

Current Mailing Address: _____

New Mailing address: _____

By: _____
Printed name of owner

Signature

Date: _____

OFFICIAL USE- Do not write in this area

Change from:

Individual

School

Tax Office

Utilities

Change made on _____

Notes:

Legible Copy of driver's license MUST be submitted with request.
Email completed form to: bjacon@townofcorinthny.com