

# REQUEST FOR CHANGE OF ASSESSING/TAX INFORMATION

Please complete the following for any change of assessing or tax information to the Town of Ogunquit's records:

## CURRENT INFORMATION

NAME:

ADDRESS

CITY:

STATE:

ZIP

TELEPHONE#:

## NEW INFORMATION

NAME:

ADDRESS

CITY:

STATE:

ZIP

TELEPHONE#:

**DESCRIBE CHANGE REQUESTED:**

\_\_\_\_\_  
PROPERTY OWNER'S SIGNATURE

\_\_\_\_\_  
DATE SUBMITTED

\_\_\_\_\_  
FOR TOWN USE ONLY

REQUEST TAKEN BY: \_\_\_\_\_

(NAME OF TOWN EMPLOYEE)

DATE ENTERED INTO TRIO \_\_\_\_\_ BY \_\_\_\_\_