

TOWN OF HOLLAND, ASSESSOR'S OFFICE

CHANGE OF ADDRESS

(ACCEPTED IN WRITING ONLY)

PARCEL ID# (for each parcel) _____

OWNER OF RECORD: _____

PROPERTY ADDRESS: _____

OLD MAILING ADDRESS: _____

NEW MAILING ADDRESS: _____

Contact information Phone # __ -- __ -- _____ email:

CHECK OFF ALL BILLS THAT THIS CHANGE WILL AFFECT:

REAL ESTATE: _____

PERSONAL PROPERTY: _____

MOTOR VEHICLE: **THIS FORM CAN NOT BE USED TO UPDATE YOUR MOTOR VEHICLE ADDRESS. THAT INFORMATION NEEDS TO BE UPDATED DIRECTLY WITH THE REGISTRY OF MOTOR VEHICLES.**

SIGNATURE(s) _____ DATE _____

OWNER OF RECORD ONLY, IF THERE ARE MULTIPLE OWNERS, ALL MUST SIGN.

RETURN TO: ASSESSOR'S OFFICE, 27 Sturbridge Road, Holland, MA 01521