

ASSESSOR'S OFFICE

ADDRESS CHANGE REQUEST FORM



https://www.colletoncounty.org/

Instructions

Please complete the address change request form and return via email to assessor@colletoncounty.org

Owners Information

	idon -	
Legal Owner's Name(s)		ling Address ity State & Zip
Physical Address	Attention I Only if diffe the owner	ferent from
Current Mailing Address	Date of Re	Request
Tax Map Number/PIN	Phone Nu	umber
	he Requester (if other than the owner)	
Person requesting the address change		
Relationship to the own	ner	
Reason for the change		
Phone Number		
Email		
Signature	Signature of the Person Submitting this Form	Name of the Person Submitting this Form (pr
Data of Cignoture		

Date of Signature