



TOWN ASSESSOR'S OFFICE

#1 North Main Street

Otis, MA 01253

Request for Mailing Address Change/Correction

*Please complete and sign this form, and return to the
Assessor's office for processing*

Date Received: _____

Applicant Name: _____

Property Location: _____

Map/Block/Lot: _____

Property Owners: _____

Current Mailing Address:

New Mailing Address (#, Street, City, State, ZIP):

Date Address Change is to become Effective: _____

Applicant Signature: _____