

## BOARD OF ASSESSORS TOWN OF FOXBOROUGH

REQUEST FOR CHANGE OF MAILING ADDRESS

Phone: (508)543-1215

Fax: (508)543-6278

Please note that the Assessor's Office cannot change a mailing address unless the property owner signs and returns this form. In addition, it is Foxborough's policy to mail the tax bill directly to the property owner, and not to any bank, mortgage company, or financial institution. In this way, the property owner becomes aware of any changes to the tax bill.

Please check one of the follo	owing:	Date of Request:
☐ New Owner Real l	Estate	As of Date
☐ New Owner Person (Busines		of Date
☐ Same owner		
Location of Property:		
Property Identification:		
Original Mailing Address:		ame
<u>-</u>		
New Mailing Address:		lease PRINT name
Request submitted by:	P	roperty Owner's Signature
Assessors Office Use: Data Changed by Changed in Vision Changed in Munis		Date Entered :