



Office of the Board of Assessors
P.O. Box 7
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Hopedale, MA 01747

Office of the
Board of Assessors

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REQUEST TO CHANGE MAILING ADDRESS

☐ Real Estate

☐ Personal Property

Today's Date: _____

Name: _____

Address of subject property: _____

Current mailing address: _____

Requested mailing address: _____

Do you own the property: Yes _____ No _____

If No, state your authorization: _____

Your signature: _____

Contact phone number: _____

Contact email address: _____

(To be completed by Assessors' Office)

Date Completed: _____

Completed by: _____

Property Parcel ID #: _____ Map: _____ Block: _____ Lot: _____

Personal Property Account #: _____