



Taxpayer's Request for Change of Mailing Address Form

Please complete all of the sections, please be sure to print clearly, and sign.

- Real Estate
- Water/Sewer
- Personal Property

Date of change request: _____

Date property acquired: _____

Property Address: _____

Owner Name(s): _____

Former mailing address: _____

NEW mailing address: _____

Signature: _____

Telephone Number: _____

Email: _____

Today's Date: _____

Please return this form to the Assessor's Office
Town Hall, 10 Mudge Way, Bedford, MA 01730

cc: Collector's Office, Department of Public Works