

Request of Address Change

The City of Waterbury Assessor's Office

Date: _____

Parcel ID: _____

(Map/Block/Lot) _____

Property Location: _____

Owners Name: _____

Mailing Address From: _____

Change Mailing Address To: _____

Name (Print): _____

Title: _____

Signature: _____

Return Completed & Signed to: Assessor's Office 235 Grand St Waterbury, CT 06702 Fax: 203-574-6992