

ALLEGAN COUNTY EQUALIZATION & TAX DESCRIPTION DEPARTMENT
3283 122nd Ave., ALLEGAN MI 49010, TELEPHONE (269) 673-0312

NAME & ADDRESS CHANGE OR UPDATE

If there is a spelling error or a change in the mailing address for billing, please indicate the corrections below. If the name on the tax bill is not the current owner of record please indicate the current owner of record and forward a copy of the document vesting such ownership (i.e. deed, land contract, etc.) LEGAL DOCUMENTATION IS MANDATORY FOR NAME CHANGES! A property transfer affidavit must be filed by the new owner with the local assessor within 45 days of transfer.

DATE: _____

TOWNSHIP OR CITY NAME _____

PARCEL NO. _____

PROPERTY ADDRESS _____

OWNER'S NAME _____

MAILING ADDRESS _____

TAXPAYER'S NAME _____

MAILING ADDRESS _____

IF TAXES ARE TO BE PAID BY INDIVIDUAL OTHER THAN OWNER OR LAND CONTRACT PURCHASER, PLEASE
INSERT "IN CARE OF" OR "C/O" BEFORE NAME

REASON FOR CHANGE _____

CHANGE REQUESTED BY _____

Always give reason for change. Example: Unrecorded transfer instrument, death certificate or judgment of divorce (attach copies).