

ANTWERP TOWNSHIP
ADDRESS UPDATE FORM

PARCEL ID #: _____ - _____ - _____ - _____ - _____

ADDRESS WHERE PROPERTY IS LOCATED:

PROPERTY OWNER

STREET ADDRESS OF PROPERTY

CITY, STATE ZIP OF PROPERTY

ADDRESS WHERE TAX BILLS SHOULD BE SENT:
(ENTER "SAME" IF MAILING ADDRESS IS SAME AS PROPERTY ADDRESS)

OWNER RESPONSIBLE FOR TAXES

ADDRESS OF TAX PAYER

CITY, STATE ZIP FOR TAX PAYER

SIGNATURE OF OWNER OR AGENT: _____ DATE: ____ / ____ / ____

WHEN COMPLETED PLEASE RETURN TO ANTWERP TOWNSHIP