

**Town of Owasco**  
**Assessor's Office**  
2 Bristol Avenue  
Auburn, NY 13021  
*Jeff Lowe, Assessor*

**REAL PROPERTY CHANGE REQUEST**

**Owners Name(s):** \_\_\_\_\_

**Tax Map Number(s) of affected properties:**

(1) \_\_\_\_\_ (3) \_\_\_\_\_

(2) \_\_\_\_\_ (4) \_\_\_\_\_

**Section 1 - Address Changes**

**Old Address:**

**New Address:**

\_\_\_\_\_  
\_\_\_\_\_

If request is to send the bill **"in care of"** another individual, please state complete name and address.

**Section 2 - Name Changes**

**Name Currently listed:**

**Name Changed to:**

\_\_\_\_\_

\_\_\_\_\_

**Reason for change:**

☐ Marriage

☐ Marriage Certificate enclosed

☐ Divorce

☐ Divorce Decree enclosed

**1. A marriage certificate or divorce decree must be enclosed in order to effectuate the change.**

**2. This change will affect the assessment roll only. Steps must be taken to change legal title to the property.**

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**Section 3 - Name removal due to death of owner**

**Names currently listed:**

**Name to be removed:**

\_\_\_\_\_

☐ Death Certificate enclosed

**1. A death certificate must be enclosed in order to effectuate the change.**

**2. This change will affect the assessment roll only. Steps must be taken to change legal title to the property.**

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date

**Complete and return to:** Assessor  
Town of Owasco  
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