

WALWORTH COUNTY
REQUEST TO CHANGE MAILING ADDRESS
(Tax Bill and Assessment Purposes only)

List the Tax Key Number(s)/Parcel Number(s) of all the parcels for which the mailing address should be changed. You will find the Tax Key Number(s)/Parcel Number(s) on your tax bill(s).

_____ _____ _____

Owner of Record: _____

Address as it appears on tax bill: _____

New Address: _____

Person Requesting Address Change: _____

If you are not the owner of the tax parcel(s) listed above, please indicate why you have authorization to change the address: _____

Daytime Phone Number: _____

Email Address: _____

Signature _____

Date _____

Return this form to:

Property Lister, 100 W Walworth St, Room 102, PO Box 995, Elkhorn, WI 53121 or fax to 262-741-4947 or email to sfinster@co.walworth.wi.us

For Office Use Only	
Received Via (Check One):	
<input type="checkbox"/> Treasurer's Office	<input type="checkbox"/> Municipality
<input type="checkbox"/> ROD Counter	<input type="checkbox"/> ROD Fax
<input type="checkbox"/> ROD Mail	<input type="checkbox"/> US Postal
Date Processed: _____	Completed By: _____
Notes: _____	
