



Changes to Address and/or Name

Cattaraugus County Department of Real Property

11/19

This form is not valid unless signed and dated by the property owner.

Town:	Tax Map Number:
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Section 1: Address Change

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

Old Address	New Address
Owner:	Owner:
Street:	Street:
City/Town, State, Zip:	City/Town, State, Zip:

Section 2: Name Change

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

Name Currently Listed:	Name Changed To:
Reason for Change:	<input type="checkbox"/> Marriage <input type="checkbox"/> Marriage Certificate Enclosed <input type="checkbox"/> Divorce <input type="checkbox"/> Divorce Decree Enclosed

Section 3: Name Removal Due to Death of Owner

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

Name Currently Listed:	Name to be Removed:
<input type="checkbox"/> Death Certificate Enclosed	

Signature: _____

Date: _____

Complete and return to your Assessor.

**Cattaraugus County
Real Property Services
Assessing Office
207 Rock City Street, Suite 101
Little Valley, NY 14755**