

WYOMING COUNTY ASSESSMENT OFFICE
ADDRESS CHANGE FORM

*PLEASE PRINT

DATE OF REQUEST: _____

PARCEL NUMBER: _____

CONTROL NUMBER (OPTIONAL): _____

PROPERTY OWNER(S): _____

SITUS ADDRESS: _____

PRESENT MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

ADDRESSED TO BE CHANGED TO:

NAME: _____

STREET: _____

CITY/STATE/ZIP: _____

PERSON REQUESTING CHANGE (PRINT NAME): _____

PHONE NUMBER : _____

REASON FOR CHANGE: _____

SIGNATURE: _____

DATE: _____

- REQUEST MUST BE MADE BY OWNER OR AUTHORIZED REPRESENTATIVE
- THIS FORM MUST BE FILED WITH THE WYOMING COUNTY ASSESSMENT OFFICE
- PLEASE RETURN FORM BY FAX, E-MAIL OR MAIL TO:

WYOMING COUNTY ASSESSMENT OFFICE
1 COURTHOUSE SQUARE
TUNKHANNOCK PA 18657

- FAX NO: (570) 836-5797
- E-MAIL: kcosner@wyomingcountypa.gov