



# City of Hamtramck

## Office of the Assessor

3401 Evaline, Hamtramck, Michigan 48212  
Assessor's Department 313-800-5233 Ext 820  
<http://www.hamtramck.us>

### ADDRESS CHANGE REQUEST FORM

Information indicating a change in mailing address or ownership has been received for this property. Please complete the following, sign and return it to the Assessing Department. If we do not receive this completed change request form, the address will remain unchanged.

PARCEL NUMBER: 41- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

DATE: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_, Hamtramck, MI 48212

INTEREST IN PROPERTY:      Owner \_\_\_\_\_ Buyer \_\_\_\_\_ Seller \_\_\_\_\_

Other (Please Specify) \_\_\_\_\_

#### CHANGES REQUESTED

NAME:      Change to: \_\_\_\_\_

Reason for Change: \_\_\_\_\_

\*\*\*You may be required to fill out a Property Transfer Affidavit\*\*\*

MAILING      Change to: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

Is this Property a Rental unit?      Yes \_\_\_\_\_ NO \_\_\_\_\_

OWNER SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

Note:      Request for changes may be made in writing only.  
We **do not** accept any name or address changes over the telephone.      (Rev. 2020-09-01)