## Wakefield Township Assessor Change of Mailing Address Request

## Please Mark Appropriate Statement

Parcel(s) are <u>no</u>	<u>t</u> currently	receiv	ing Pri	ncipal R	esidence Ex	kemption	
Parcel(s) are curr Rescind the exem	5	0	-		-	tion and I need to	
, ,	-	_	_		_	tion and exemption	
Please provide ALL	Tax ID num	bers yo	ou wish	to includ	e in this add	dress change. If Par	cel
		-				ged, Thank you.	
Tax ID number(s)							
			_ <b>-</b>				
	_		_	_			
					·	<del></del>	
Owners Name							
Property Address							
PREVIOUS Mailing A	\ddress						
CORRECTED Mailing	g Address_						
No Addres	s changes	will b	e made	withou	t a signitur	e Thank you.	
Signature of Owner or Owner's Agent				_	Date		
Signature of Owner or Owner's Agent					Phone number in case any questions arise. (P.R.E, etc.)		
Return complete form to: Wakefield Township Assessor Melissa Prisbe							
P.O. Box 164 Wakefield, MI 49968							
(906)364-2910							

Or email: melissaprisbe@gmail.com

For more information and additional forms please visit our website at:

https://wakefieldtownship.com/