



**Assessing Office**  
58 Opera House Square,  
Claremont, New Hampshire 03743  
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## CHANGE OF ADDRESS FORM

A request for change of mailing address for the property tax bill or the water and sewer bill must be received in writing from the taxpayer to the Assessing Department.

**Please note:** It is the policy of the City of Claremont to send the tax bill to the property owner, therefore, we cannot honor requests to send property tax bills to banks or mortgage companies.

Date \_\_\_\_\_

Tax Account # \_\_\_\_\_ Map/Lot # \_\_\_\_\_ Water and Sewer Account # \_\_\_\_\_

Owner(s) Name(s): \_\_\_\_\_

Property Location: \_\_\_\_\_

**New Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I attest to by this submission that I (we) am (are) the property owner(s) of the above listed property.

Owner(s) Signature (s): \_\_\_\_\_