



Town of Orleans

Map/Parcel (Office Use Only)

19 School Road Orleans Massachusetts 02653
Telephone (508) 240-3700 Fax (508) 240-3388

Change of Address Form

PLEASE COMPLETE THIS FORM AND RETURN IT TO THE ASSESSOR'S OFFICE.

A signed version of this form must be submitted. An e-mail version is acceptable:
(E-Mail to: mgilmore@town.orleans.ma.us)

Please check all departments you would like to notify of your address change:

- | | |
|---|---|
| <input type="checkbox"/> Assessing (Real/Personal Property Taxes) | <input type="checkbox"/> Water (Water Bill) |
| <input type="checkbox"/> Harbormaster (Boat Excise/Moorings) | <input type="checkbox"/> Building |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Library |
| <input type="checkbox"/> Planning Board | <input type="checkbox"/> Town Clerk |
| <input type="checkbox"/> Board of Health | <input type="checkbox"/> Fire |

To change the mailing address for your motor vehicle excise, please contact the Mass. Registry of Motor Vehicles.

Property Address: _____

Owner's Name: _____

Your Name: _____

New Mailing Address: _____

Signature: _____ **Date:** _____