

ROSCOMMON COUNTY
EQUALIZATION DEPARTMENT

COUNTY BUILDING
ROSCOMMON, MICHIGAN 48653
PHONE (989) 275-8121

CHANGE OF NAME OR ADDRESS

	<u>OLD</u>	<u>NEW</u>
Name:	_____	_____
Address:	_____	_____
	_____	_____

Parcel No: _____

REASON FOR CHANGE:

- Moved.....()
 - Street name change (911).....()
 - Is this your permanent mailing address.....()
 - Changed name.....()
 - Remove name (death).....()
- Enclose copy of death certificate.

* Owner change
* Must record document at Register of Deeds Office.

Date Effective _____