

Lauderdale County Assessor

P O Box 687 Meridian, MS 39302-0687

CHANGE OF MAILING ADDRESS FORM

Previous Mailing Ac	Idress:				
City:	State	:		Zip:	
New Mailing Addres	ss:				
City:	State	:		Zip:	
Parcel(s) / PPIN(S)					
1					
2					
3					
4					
5					
PERSON REQUEST	ING CHANGE:				
OWNER OR RELATI	ONSHIP TO OWNE	ER:			
PHONE NUMBER: _					
SIGNATURE:			_ DATE:		
		IN OFFICE US	SE ONLY		
IN PERSON	BY MAIL	BY PHONE_		DATE CHANGED _	
DEPUTY ASSESSOR	 R	_	DATE		