



## CHANGE OF MAILING ADDRESS TANGIBLE

COMPLETION OF THIS FORM WILL CHANGE THE MAILING ADDRESS ON FILE WITH THE CITY OF CRANSTON. FUTURE TAX BILLS WILL BE MAILED TO THIS NEW LOCATION (IN CASES WHERE THE LENDER RECEIVES THE TAX INFORMATION DIRECTLY, THEY WILL CONTINUE TO DO SO). THE MAILING INFORMATION WILL ALSO BE CHANGED FOR SEWER BILLS, IF APPLICABLE. PLEASE NOTE THAT CHANGING THE MAILING INFORMATION ON OWNED REAL ESTATE WILL NOT CHANGE ANY VEHICLE REGISTRATION OR LICENSE INFORMATION WITH THE DEPARTMENT OF MOTOR VEHICLES. PLEASE CONTACT THE RI DMV FOR ASSISTANCE IN MAKING THOSE CHANGES.

**\*PLEASE PRINT CLEARLY\***

RETURN FORM TO: 869 PARK AVE, CRANSTON, RI 02910

PHYSICAL PROPERTY ADDRESS: \_\_\_\_\_

\_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

BUSINESS OWNER: \_\_\_\_\_

NEW MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TODAY'S DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

RELATIONSHIP TO BUSINESS (OWNER/AGENT/ETC): \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

CONTACT PHONE: \_\_\_\_\_

LICENSE STATE: \_\_\_\_\_ LICENSE NUMBER: \_\_\_\_\_ EXPIRATION: \_\_\_\_/\_\_\_\_/\_\_\_\_