

NIOBRARA COUNTY ASSESSOR
PO BOX 120
LUSK, WY 82225
tstephens@niobraracounty.org

Change of Mailing Address
REQUEST FORM

Date: _____

I/We hereby request that all correspondence and notices regarding Account(s)

be mailed to:

New Mailing Address:

Reason for Change of Address

_____ Buying the property on contract

_____ Co-Owner needs to receive tax bill

_____ Relative needs to receive tax bill

_____ Power of Attorney (*please attach a copy*)

_____ Attending to the Estate of deceased property owner. *Please attach a copy of the Will naming you as Personal Representative/Executor/Executrix or a court order appointing you as Personal Representative/Executor/Executrix. If no such document is available, you will need to show relationship through Affidavit of Identity (Available in our office).*

_____ Other - please explain: _____

Change Requested By:

All owners of said property(s) must sign this form below

This request is to remain in effect until further notification. I/We understand that this request will not relieve me/us of any obligation for penalty and interest on unpaid taxes should a delinquency arise. **This request does not change ownership of the property.**

Owner

Date

Owner

Date

Owner

Date

Owner

Date

State of _____

County of _____

The above and foregoing Request was acknowledged before me by _____
this ____ day of _____, 20__.

WITNESS my hand and official seal.

Notarial Officer

My Commission Expires: _____

May attach other notary forms if needed.

<p>For Office Use Only</p> <p>Person who took request: _____</p> <p>Address Change made and note in RW _____</p> <p>Account #(s) _____</p>
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