NIOBRARA COUNTY ASSESSOR PO BOX 120 LUSK, WY 82225

tstephens@niobraracounty.org

Change of Mailing Address REQUEST FORM

be mailed to:	
New Mailing Address:	
	Reason for Change of Address
Buying the property	y on contract
Co-Owner needs to	receive tax bill
Relative needs to re	eceive tax bill
Power of Attorney	(please attach a copy)
Attending to the Es	tate of deceased property owner. Please attach a copy of the Will
naming you as Pers	sonal Representative/Executor/Executrix or a court order appointing
you as Personal Re	presentative/Executor/Executrix or copy of the Trust naming you as
the Successor of the	e Trust. If no such document is available, you will need to show
relationship throug	h Affidavit of Identity (Available in our office).
Other - please expla	ain:
Change Requested By:	

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	Date		
Owner		Date	Date		
Owner		Date	Date		
Owner			Date		
State of					
County of					
this day	above and foregoing Request was y of, 20 TNESS my hand and official seal.	·			
		Notar	rial Officer		
My Commis	sion Expires:				
	<u>May attach o</u>	ther notary forms if need	<u>led.</u>		
For Office Use Only					
	Person who took request:				
	Address Change made and note in RW				
	Account #(s)				