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Taxpayer Change of Information Request MENARD COUNTY ASSESSMENT OFFICE 102 S 7TH ST. PETERSBURG, IL 62675 dkelton@co.menard.il.us

217-632-4461

Current Owner(s):

Property Address:

Property Parcel Number(s):

Reason for change, check all that apply:

Name Change **Address Change** Add Duplicate Bill

NEW TAX PARCEL INFORMATION

Name Change:

Address: _____

Phone: email:

I hereby certify that I am the owner, trustee, or person having power of attorney for the owner of the above listed parcels.

Requester's Signature

Date

This doesn't change the deed or ownership of the property, this is only for mailing purposes.