



Mailing Address Change

Please complete and return to:
Department of Assessment Services
Attn: Tom Glock, Assessor
820 Mercer St. Room 108
Cherry Hill, NJ 08002-2638

Block: _____ Lot: _____ Qual.: _____

Property Location: _____

Name: _____

New Mailing Address:

Street _____

Apt/P.O. _____

City, State Zip _____, _____

Date: _____ Property Owner's Signature: _____