



**Town of Lexington
Assessor's Office**

Board of Assessors, 1625 Massachusetts Ave., Lexington, MA 02420

Telephone: (781)698-4578

Fax: (781)861-2733

TAO@lexingtonma.gov

**MAILING ADDRESS/NAME CHANGE REQUEST
MUST BE LEGAL OWNER OF RECORD**

DATE _____

PARCEL ID # _____

PROPERTY LOCATION _____

OWNER'S NAME(S) _____

**NEW MAILING ADDRESS/NAME(S)
PLEASE PRINT**

NAME(S) _____

ADDRESS _____

SIGNATURE _____ DATE _____

I am the Owner/Trustee/Property Manager of the above address and am responsible for the payment of bills to the Town of Lexington.

TELEPHONE NUMBER _____

Please fill out a separate "Change of Address" form for each property. Thank you.

Office Use Only

| Form of Identification | Verified by: | Changed on Vision by | Date of Change |
|------------------------|--------------|----------------------|----------------|
| | | | |

You may mail, fax, deliver or email this form to the address above.
Thank you.