Alcona County Equalization Department Change of Mailing Address Request

No Address changes will be made without a signature, Thank you.

Please Mark Appropriate Statement

 □ Parcel(s) are not currently receiving Principal Residence Exemption □ Parcel(s) are currently receiving Principal Residence Exemption and I need to Rescind the exemption. (Please also include Rescind form) □ Parcel(s) are currently receiving Principal Residence Exemption and exemption should remain as is. Please explain: □ Please provide ALL Tax ID numbers you wish to include in this address change. If Parcel numbers are not listed they will subsequently not get changed, Thank you. 			
		Tax ID number(s)	<u></u>
			<u></u>
			<u></u>
Owners Name			
Property Address			
PREVIOUS Mailing Address			
CORRECTED Mailing Address			
Signature of Owner or Owner's Agent	Date		
Signature of Owner or Owner's Agent	Phone number in case any questions arise. (P.R.E, etc.)		
Determ complete forms to:			

Return complete form to:

Alcona County Equalization Dept. PO Box 322 Harrisville, MI 48740 989-724-9430

For more information and additional forms please visit our website at: alconacountymi.com under the Equalization Department page.