

CITY OF BERKLEY

ADDRESS/INFORMATION CHANGE

NAME CHANGE

NEW NAME: _____

OLD NAME: _____

MAILING ADDRESS CHANGE:

NO LONGER ESCROWED

NEW ADDRESS: _____

OLD ADDRESS: _____

IS THE PROPERTY STILL YOUR PRIMARY RESIDENCE? _____

NOTES/
SPECIAL
INSTRUCTIONS

**PLEASE CHECK ALL
DEPARTMENT(S) AFFECTED**

BUILDING/PLANNING

TAXES (TREASURY)

WATER (DPW)

SIGNATURE: _____

PRINTED NAME: _____ DATE: _____

CONTACT NUMBER: _____

PROPERTY ADDRESS (IF NOT PROVIDED ABOVE):

