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) _____-_____-_____-_____-_____

_____-_____-_____-_____-_____

_____-_____-_____-_____-_____

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.)

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.