OFFICE OF THE CHIEF FINANCIAL OFFICER
Office of the Assessor

Coleman A. Young Municipal Center
2 Woodward Avenue, Suite 804
Detroit, Michigan 48226

Phone 313•224•3025
Fax 313•224•4270
www.detroitmi.gov

PERSONAL PROPERTY
CHANGE OF ADDRESS FORM

DOCUMENTS REQUIRED

INDIVIDUAL:	***COPY OF DRIVER'S LICENSE OR IDENTIFICATION CARD***
CORPORATION:	***REQUEST FROM AUTHORIZED SIGNATORY ON LETTERHEAD, COPY OF ARTICLES OF INCORPORATION OR ORGANIZATION***
LIMITED LIABILITY COMPANY (LLC):	***COPY OF CERTIFICATE***

PARCEL ID: _____ **PROPERTY ADDRESS:** _____

PRINT PROPERTY OWNER INFORMATION BELOW:

Owner First Name M.I. Last Name

Mailing Address

City State Zip Code Telephone Number

IF TAX BILL SHOULD BE SENT TO OTHER THAN OWNER
PRINT INFORMATION OF PERSON TO RECEIVE BILL BELOW:

Taxpayer First Name M.I. Last Name

Mailing Address

City State Zip Code

SIGNATURE OF PERSON AUTHORIZING CHANGE (REQUIRED) PRINT NAME HERE

FOR OFFICE USE ONLY:

DATE RECEIVED: CHANGE MADE BY:

VERIFICATION ATTACHED: ☐ Deed ☐ Probate/POA ☐ State ID/Driver's License ☐ Other_____

You may submit this form to PersonalProperty@detroitmi.gov

Revised: 2-19-2018