



**ATTENTION: PROPERTY TRANSFER AFFIDAVIT MUST BE FILED
BEFORE SUBMITTING REQUEST**

**PROPERTY OWNER
MULTIPLE PARCEL CHANGE OF ADDRESS FORM**

DOCUMENTS REQUIRED

<i>INDIVIDUAL:</i>	<i>COPY OF DRIVER'S LICENSE OR IDENTIFICATION CARD</i>
<i>COMPANY OR CORPORATION:</i>	<i>1. COPY OF ARTICLES OF INCORPORATION OR 2. AUTHORIZED SIGNATORY ON COMPANY LETTERHEAD</i>
<i>LIMITED LIABILITY COMPANY (LLC):</i>	<i>COPY OF CERTIFICATE</i>

	PARCEL ID	PROPERTY ADDRESS
1.		
2.		
3.		
4.		
5.		

PRINT PROPERTY OWNER INFORMATION BELOW:

Owner Name _____ M.I. _____ Last Name _____

Mailing Address _____

City _____ State _____ Zip Code _____ Telephone Number _____

SIGNATURE OF PERSON AUTHORIZING CHANGE (REQUIRED) PRINT NAME HERE

**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 _____

SUBMIT THIS FILLABLE FORM: ASSESSORSPECIALPROCESSING@DETROITMI.GOV