



MADISON COUNTY AUDITOR'S OFFICE

ANDERSON, INDIANA

Todd Culp, Auditor

CHANGE OF MAILING ADDRESS FORM

I am the property owner or Power of Attorney as indicated below regarding the following real estate record (s):

STATE PARCEL NUMBER

PROPERTY ADDRESS

I am requesting the Auditor of Madison County to change the mailing address of property(ies) listed above to:

Name _____

Street _____

City _____ State _____ Zip _____

Is this mailing address your primary residence? Yes _____ No _____

(By checking yes to the above question, certain exemptions may be removed from the former property)
Please contact Auditors office at (765) 641-9419 if you have any questions.

Phone Number _____

Print _____

Signature _____

Title other than Owner _____

(If Personal Representative or POA, please submit designating documentation)

PLEASE RETURN THIS FORM TO:
Madison County Auditor's Office,
16 E. 9TH St. Room 101, Anderson, IN 46016