



TOWN OF OXFORD

Board of Assessors

325 Main Street, Oxford, MA 01540
Phone (508) 987-6038 ext. 1051
Fax (508) 987-3706
assessor@oxfordma.us

REQUEST FORM FOR CHANGE IN MAILING ADDRESS

Date of request: _____

Please note that the Assessors' Office cannot change an owner's name without a deed reflecting the change, or an owner's mailing address unless the property owner signs and returns this form. To prevent unauthorized changes, address and name changes cannot be made by telephone.

Please check one:

Personal Property (business): _____

Residential: _____

Location of Property: _____
Property Address

Property Identification: _____
Map / Parcel

Original Mailing address: _____

New mailing address: _____

Request submitted by: _____
Property Owner's Signature

Print Name

Phone number

**PLEASE RETURN TO THE OXFORD ASSESSOR'S OFFICE
BY MAIL, EMAIL, FAX, TOWN HALL DROP BOX or IN PERSON**

Assessor's Office Use: _____

Data changed by: _____ Date entered: _____