



TOWN OF OXFORD

Board of Assessors

Christopher T. Pupka, Town Assessor
325 Main Street, Oxford, MA 01540
Phone (508) 987-6036 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:

Same owner (address change): _____

New owner of Personal Property (business): _____ As of date: _____

Location of Property: _____
Property Address

Property Identification: _____
Map Block Lot

Original Mailing address: _____

New mailing address: _____

Request submitted by: _____
Property Owner's Signature

Please Print Your Name

**PLEASE RETURN TO THE OXFORD ASSESSOR'S OFFICE OR YOU MAY
FAX THIS FORM TO 508-987-3706. THANK YOU.**

Assessor's Office Use:

Data changed by: _____ Date entered: _____