

Township of Barnegat

COUNTY OF OCEAN

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Tax Assessor
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BARNEGAT TOWNSHIP CHANGE OF MAILING ADDRESS

PLEASE COMPLETE AND RETURN TO THE ASSESSOR'S OFFICE

BLOCK _____ LOT _____ QUAL _____

EFFECTIVE DATE OF CHANGE: _____

PROPERTY LOCATION _____

OWNER'S NAME _____

CONTACT NUMBER: _____

EMAIL ADDRESS: _____

PLEASE CHANGE THE MAILING ADDRESS FOR THE ABOVE MENTIONED
PROPERTY TO:

**PLEASE NOTE: CHANGING YOUR MAILING ADDRESS FOR TAX BILL
PURPOSES WILL ALSO CHANGE YOUR ADDRESS FOR WATER & SEWER BILLS**

OWNER'S SIGNATURE _____

DATE: _____

gbz/2019