



TOWN OF CONWAY

23 MAIN STREET + P.O. BOX 2680 + CONWAY, NEW HAMPSHIRE 03818

(603) 447-3811
WWW.CONWAYNH.ORG

ADDRESS CHANGE REQUEST

NAME: _____

MAP/LOT#: _____

PROPERTY LOCATION: _____

NEW MAILING ADDRESS:

MAILING: _____

CITY: _____ STATE _____ ZIP _____

I do hereby authorize the Town of Conway's Assessing Department to change the mailing address for the above parcel(s) for tax billing and notification purposes.

Signed _____ Date _____

Phone# _____