



**TOWNSHIP OF WEST WINDSOR**  
*Department of Administration*  
*Finance Division*  
*Office of Tax Assessment*

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I have changed my permanent mailing address. Kindly adjust the records for the follow property:

Block \_\_\_\_\_ Lot \_\_\_\_\_ Qual \_\_\_\_\_

Property Location \_\_\_\_\_

Former Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

New Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_

Owners Name (Please Print): \_\_\_\_\_

Owners Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Office of the Tax Assessor  
PO Box 38  
271 Clarksville Rd  
West Windsor, NJ 08550  
(609) 799-2400  
Fax (609) 799-2044