

**Town of Orange, Connecticut**  
**Office of the Assessor**

**CHANGE OF ADDRESS FORM FOR:**    REAL ESTATE    PERSONAL PROPERTY

Parcel address \_\_\_\_\_

Account #/unique ID \_\_\_\_\_

Name of Property Owner \_\_\_\_\_

Name of Business (if personal property) \_\_\_\_\_

**New Mailing Address**

Name and/or Care of \_\_\_\_\_

Address \_\_\_\_\_

\*\* Only the Property Owner or the Authorized Agent may make address changes\*\*

Name of person requesting change (print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please mail to:** Assessor's Office  
617 Orange Center Road  
Orange, CT 06477

For office use only  
date changed:

**Or fax to:** (203) 891-2185  
Attention: Assessor's Office

changed by: