



Town of Carlisle



Office of

BOARD OF ASSESSORS

Scan & email to: mmcinerney@carlislema.gov

Or mail to: 66 Westford St

Carlisle, Massachusetts 01741

CHANGE OF ADDRESS FORM

In order for this office to properly bill the owner(s) or authorized representative, fill out completely.

Location of Property	Map & Parcel	Owners Name

1. The Name and Address where you would like the bill sent.

2. Are you the current owner(s) of the property YES NO

3. Are you the new owner(s) of the property? YES NO

Date of Purchase: _____

Previous Owner: _____

4. If you are not the owner, please state your interest in the property.

Signature of Owner/Authorized Representative

Date

Please PRINT Name

Date