TAYLOR SAPPINGTON - *Athens County Treasurer*
15 South Court Street • Room 334 • Athens, Ohio 45701-2891

Address Change Request Form

Owner Name (as it appears on bill): _____

Parcel Number(s): _____

_____

_____

Mailing Name: _____

Mailing Address: _____

_____

_____

Phone Number(s): _____

Email: _____

Signature: _____ **Date:** _____

Ohio Revised Code Section 323.13 requires that a change in the mailing address of any tax bill shall be made in writing to the county treasurer.

Please complete and return this form to: **Athens County Treasurer**
15 S. Court St. Room 334
Athens, OH 45701