



**CITY OF ALBANY  
OFFICE OF THE TREASURER  
ROOM 109  
24 EAGLE STREET  
ALBANY, NEW YORK 12207  
TELEPHONE (518) 434-5035**

**KATHY SHEEHAN  
MAYOR**

**DARIUS SHAHINFAR  
CITY TREASURER**

Please change the mailing address for property tax bills on

**Parcel Number:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**CHANGE TO:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Current Owner of Record: \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Date:** \_\_\_/\_\_\_/\_\_\_

**Name of owner on record:** \_\_\_\_\_

(Please print name)

\_\_\_\_\_

(Please sign name)