City of Saratoga Springs
OFFICE OF COMMISIONER OF ACCOUNTS
~ASSESSMENT DEPARTMENT~
City Hall – 474 Broadway
Saratoga Springs, New York 12866
Telephone 518-587-3550, ext. 2551
Fax number 518-587-6512

CHANGE OF ADDRESS REQUEST FORM

_____ _____

Owner of Record Tax Parcel ID #

Current Mailing Address: _____

_____

New Mailing address: _____

_____

By: _____ Phone: _____

Authorized Signature

_____ Date: _____

Print name and relationship to owner

OFFICIAL USE

Change from:

- ☐ Individual
- ☐ Tax Office
- ☐ School
- ☐ Utilities

Change made on _____

Notes:

Copy of driver's license MUST be submitted with request.
e-mail completed form to:
margaret.lopresti@saratoga-springs.org