



TANGIBLE CHANGE OF ADDRESS

PROVIDENCE CITY HALL
CITY ASSESSORS
PROVIDENCE RI 02903

PLEASE PROVIDE A COPY OF LICENSE OR ID

WALK-IN: _____

PHONE: _____

ACCOUNT #: _____

NAME OF BUSINESS: _____

NEW ADDRESS: _____

EMAIL _____

TELEPHONE# _____ - _____ - _____

TAKEN BY: _____

DATE: _____