COHOCTAH TOWNSHIP 3530 Gannon Road Howell, MI 48855

Name and/or Address Change Request Form

Parcel Number: 47-02	
Requested by:	
Property Owner:	
Property Address:	
Mailing Address:	
Telephone Number: ()	
Reason for Change:	
/	
Date Signature	
If you are requesting a change in property ownership, please provide a copy of a Deed, Lan Death Certificate and/or Judgment of Divorce. This change is for tax billing purposes only guarantee or indicate Fee Simple Title to property.	
FOR ASSESSING DEPARTMENT USE ONLY	
Updated Equalizer:/ Initials:	
Comments:	