NAME/ADDRESS CHANGE

RETURN TO

Chief County Assessment Officer
Piatt County Courthouse
101 W. Washington St. - Rm 102
Monticello, IL 61856

① **Property Identification Number**

② **Property Location** (street/road address)

③ **Date**

/ /

④ **Status** Please check one

❑ Property Owner ❑ Trustee ❑ Power of Attorney ❑ Other _____
Specify

⑤ **Owner, trustee or agent for the owner/trustee**

Last Name

First Name

Co-addressee

Address

City

State Zip

Daytime Phone

Upon oath, and under penalties of perjury as provided by law, I hereby affirm, represent, warrant and certify to the office of the Piatt County Assessor that I am the legal, beneficial and/or equitable owner, trustee or agent for the owner or trustee for the above property and that I have the legal, equitable or actual authority to execute this instrument.

Rev. 10-00

⑥ **Signature**

⑦ **Please print your Name**

If submitting by mail, a copy of your driver's license is required or the form must be notarized.

Year | Twp #

OFFICE USE ONLY

Approved

Comments

Notary Signature

Notary Date

Notary Seal