It is the current policy of the Supervisor of Assessments to have the homeowner's signature on file when requesting their tax bill be sent to another address.

Index Number & Address of Prope	erty:
14-33.0-128-031	715 W MONROE ST
	<u> </u>
I would like my tax bill(s) sent to	the following address:
Name:	
Address:	
-	
_	
Signed:	
Daytime telephone:	
Email Address:	
Please be advised that if request ownership must be submitted, i.e property.	is made for a change of name, the proper documents conveying e. copy of deed, will, or other legal document conveying rights to
Thank you.	
	for office use only
Completed by:	Mortgage Code: (If applicable)