

**CITY OF ST. JOHNS
100 E. STATE STREET
P.O. BOX 477
ST. JOHNS, MI 48879
(989) 224-8944**

PROPERTY CODE NO. 19 - 300 - - - -

NAME OR ADDRESS CHANGE

PROPERTY ADDRESS: _____

PROPERTY OWNER NAME
AND MAILING ADDRESS: _____

TAXPAYER NAME
AND MAILING ADDRESS
(i.e., MORTGAGE CO.) _____

PROPERTY OWNER SIGNATURE

DATE

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PLEASE SEE THE ATTACHED NOTICE WE HAVE RECEIVED REGARDING YOUR MORTGAGE COMPANY. PLEASE REVIEW, SIGN, AND RETURN TO ASSURE YOUR PROPERTY TAXES ARE BEING SENT TO THE CORRECT MORTGAGE COMPANY.

WE WILL NOT MAKE ANY CHANGES UNLESS THIS FORM IS SIGNED AND RETURNED BY THE PROPERTY OWNER.

PLEASE FEEL FREE TO CALL IF YOU HAVE ANY QUESTIONS

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