

BERKS COUNTY ASSESSMENT CHANGE OF ADDRESS FORM

PIN# ____ - ____ - ____ - ____ - ____ - ____ **LOCATION** _____

CURRENT OWNER _____

C/O _____ **ADDRESS** _____

CITY _____ **STATE** ____ **ZIP** _____ - _____

REVISED ADDRESS

C/O _____ **ADDRESS** _____

CITY _____ **STATE** ____ **ZIP** _____

SIGNATURE _____ **OWNER** ____ **MANAGER** ____

PRINT SIGNATURE _____ **OTHER** ____

DATE _____

**PLEASE COMPLETE, SIGN AND RETURN TO Berks County Assessment Office,
Berks County Services Center, 3rd Flr., 633 Court Street, Reading, PA 19601-4320**

11/4/05 KAM