

CITY OF BRUNSWICK
CHANGE OF MAILING ADDRESS AND CORRECTION FORM

Please complete and submit this form to request a change of mailing address and/or correction.

Check the box that applies:

- Legal owner of the property.
- An individual who is not the legal property owner (must provide documentation to substantiate relationship to the owner(s) or legal interest in the property).
- An attorney (must provide attorney letter or copy of Power of Attorney stating the relationship to owner).
- Trustee (must provide a will or testamentary documents with their name listed).
- Business owner or representative (property in the name of a business may send written correspondence or complete this form on behalf of the company).

Name: _____

Property address: _____ Parcel Number: _____

Mailing address: _____

Date moved or no longer occupied property address: _____

I do swear or affirm that the above facts are true and accurate.

Signature _____ Daytime phone number _____ Date _____

Print Name _____ Relationship to owner _____

Please return this form to the City of Brunswick Tax Department:

By mail: PO Box 550
Brunswick, GA 31521

In person: City Hall
601 Gloucester St. Brunswick, GA
31520

Email to: tax@cityofbrunswick-ga.gov

OFFICE USE ONLY:

Date processed _____ Parcel ID _____

Address Changed? Yes or No _____

Tax Year _____