DEPARTMENT OF FINANCE
Municipal Building ● 255 Main Street ● White Plains, New York 10601
(914) 422-1233 ● Fax: (914) 422-1273

TAX ACCOUNT CHANGE FORM

Tax Account Number:_____

Property Location: _____

Home Telephone #:_____ Work Telephone #:_____

Owner:_____

Please check one of the following:

___Mortgage Satisfied ___Refinanced ___New Owner ___Change of Billing Address Only

___Send Bill to Mortgage Company

Please Send Bills To:

Name: _____
Address:_____
City: _____ State:____ Zip:_____

Note: Change of ownership can only be made by the Assessor's office upon receipt of certified copy of a recorded deed received from Westchester County Land Records Office.

_____ ___/___/____
Signature Date

For Finance Department Use Only:

Forwarded To Assessor's Office:_____ Date: ___/___/____

Change processed by Assessor's Office: _____ Date: ___/___/____

Bank Code Deleted:_____ Initials: _____
Bank Code Added: _____ Initials: _____