



Data/Address Change Form

Property Account Number: _____

Property Location: _____

Old Mailing Address Information

Full Name: _____

Address: _____

Street Address

Apartment/Unit #

City

State

ZIP Code

New Mailing Address Information

Full Name: _____

Address: _____

Street Address

Apartment/Unit #

City

State

Zip Code

Other Corrections

Submitter's Information (All fields required for request to be considered)

Full Name: _____

Address: _____

Street Address

Apartment/Unit #

City

State

ZIP Code

Primary Phone: ()

Alternate Phone: ()

Relationship
to owner:

Signature: _____ (Print Name) _____

Return to:

Lancaster County Property Assessment Office
150 North Queen Street, Suite 310
Lancaster, PA 17603

Phone: (717) 299-8381 Hours: Mon-Fri 8:30 am – 5:00 pm

Fax: (717) 299-8376 (Attn: Kevin Edwards) Email to: EdwardsK@co.lancaster.pa.us