VILLAGE OF SOUTHAMPTON TAX RECEIVER INFORMATION CHANGE FORM
23 MAIN STREET
SOUTHAMPTON, NY 11968
PHONE 631-283-0247 FAX 631-283-4990

TAX MAP #				**PROPERTY LOCATION**
DISTRICT	SECTION	BLOCK	LOT	STREET
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

MAILING ADDRESS INFORMATION

NAME_____

C/O_____

ADDRESS_____

APT/SUITE/FLOOR_____

CITY_____STATE_____ZIP CODE_____

AUTHORIZATION*
***MUST BE SIGNED BEFORE CHANGE IS ACCEPTED**

SIGNATURE_____DATE_____

PHONE #'S (IMPORTANT!!)_____

IT IS THE RESPONSIBILITY OF THE PROPERTY OWNER TO VERIFY IF TAXES ARE CURRENT