

**Schuyler County Supervisor of Assessments Office**  
**102 S Congress, Suite 102**  
**Rushville, Illinois 62681**

**Request for Mailing Address Change**, please complete the following:

IT IS THE CURRENT POLICY OF THE SUPERVISOR OF ASSESSMENTS TO HAVE THE HOMEOWNER'S SIGNATURE ON FILE WHEN REQUESTING THEIR TAX BILL BE SENT TO ANOTHER ADDRESS.

DATE: \_\_\_\_\_

PROPERTY ID #:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I WOULD LIKE MY TAX BILL(S) SENT TO THE FOLLOWING ADDRESS:

NAME: \_\_\_\_\_

\_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CUSTOMER SIGNATURE: \_\_\_\_\_

CUSTOMER SIGNATURE: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

PLEASE BE ADVISED THAT IF REQUEST IS MADE FOR A CHANGE OF NAME, THE PROPER DOCUMENTS CONVEYING OWNERSHIP MUST BE SUBMITTED, I.E. COPY OF DEED, WILL, OR OTHER LEGAL DOCUMENT CONVEYING RIGHTS TO PROPERTY.

THANK YOU.