

**Cass County Michigan
Tax Bill Mailing Address Change
Request Form**

Property Parcel # _____

Please provide the following information for the Mailing Address Change.

New Mailing Address: _____

Additional Tax Bill _____
Address: _____

Person(s) Requesting the Mailing Address Change:

Print: _____

Signature: _____

Date: _____

Phone Number: _____

E-Mail (if available): _____

Important Note – If you would like a second tax bill mailed to another address, please fill out this form and note that this additional address is for second tax bill mailing purposes only.

*Please feel free to contact the Cass County Equalization Department with questions.
(269) 445-4442 (Option 2) or (269) 445-4440 or email to addresschanges@cassco.org

Submit your completed form in one of the ways below:

- via email to addresschanges@cassco.org
- fax it to 269-445-4495
- turn in the paper copy to: Cass County Equalization Department
120 N. Broadway Suite 111, Cassopolis, MI 49031