



OFFICE OF THE CHIEF FINANCIAL OFFICER  
**Office of the Assessor**

Coleman A. Young Municipal Center Phone 313•224•3035  
2 Woodward Avenue, Suite 804 Fax 313•224•4270  
Detroit, Michigan 48226 [www.detroitmi.gov](http://www.detroitmi.gov)

**ATTENTION: PROPERTY TRANSFER AFFIDAVIT MUST BE FILED  
BEFORE SUBMITTING REQUEST**

**[CITY OF DETROIT ACCESSMYGOV.COM](http://CITYOFDETROITACCESSMYGOV.COM)**

**PROPERTY OWNER CHANGE OF ADDRESS FORM**

**DOCUMENTS REQUIRED**

<i>INDIVIDUAL:</i>	<i>COPY OF DRIVER'S LICENSE OR IDENTIFICATION CARD</i>
<i>COMPANY:</i>	<i>AUTHORIZED SIGNATORY ON COMPANY LETTERHEAD</i>
<i>LIMITED LIABILITY COMPANY (LLC):</i>	<i>COPY OF CERTIFICATE</i>

<b>PARCEL ID:</b>		<b>PROPERTY ADDRESS:</b>	
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**PRINT PROPERTY OWNER INFORMATION BELOW:**

Owner First Name M.I. Last Name

Mailing Address

City State Zip Code Telephone Number

1. DO YOU HAVE A PRINCIPAL RESIDENCE EXEMPTION ON THIS PROPERTY? YES  NO
2. DO YOU WANT THE EXEMPTION TO BE RESCINDED? YES  NO

**IF TAX BILL SHOULD BE SENT TO OTHER THAN OWNER  
PRINT INFORMATION OF PERSON TO RECEIVE BILL BELOW:**

Taxpayer First Name M.I. Last Name

Mailing Address

City State Zip Code

**SIGNATURE OF PERSON AUTHORIZING CHANGE (REQUIRED) PRINT NAME HERE**

**FOR OFFICE USE ONLY:**

DATE RECEIVED: CHANGE MADE BY:  
VERIFICATION ATTACHED:  Deed  Probate/POA  State ID/Driver's License  Other \_\_\_\_\_

**[You may submit this form to AssessorsSpecialProcessing@detroitmi.gov](mailto:AssessorsSpecialProcessing@detroitmi.gov)**