



**GRAND HAVEN CHARTER TOWNSHIP**  
13300 168th Avenue • Grand Haven, Michigan 49417 • Phone: 616.842.5988 • Fax: 616.842.9419

### Change of Mailing Address Form

Owner Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Property Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
\_\_\_\_\_

\*\*Parcel Number(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*Please include all parcel numbers affected by address change.

New Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Please complete all of the following that applies:

What is the effective date of this change? \_\_\_\_\_

Do you have a Principal Residence Exemption on this Property?  Yes  No

Is this change permanent or temporary?  Permanent  Temporary

If this change is temporary, please indicate why:  Work or Teaching sabbatical  Military  Nursing home  vacation  Other \_\_\_\_\_

What is the date you expect to return to this property? \_\_\_\_\_

Will the property be occupied while you are away?  Yes  No

If address change is to a  PO Box or  Business or  LLC (please provide an explanation)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name if not owner

\_\_\_\_\_  
Relationship to Owner

**Please remember to file this form EACH time an address update is needed**

*For office use only:*

Date Received: \_\_\_\_\_

Date Processed: \_\_\_\_\_

Employee Initials: \_\_\_\_\_

PRE: Y/N