



**ADDRESS CHANGE FORM**

Please print this form and mail to:

Shelton Tax Collector

PO Box 273

Shelton, CT 06484

OR

Email to one or all of the email addresses listed below.

OR

Bring into the office

**\*\*Kindly complete a separate form for everyone whose address you are updating\*\***

**NAME:**

**DATE OF BIRTH:**

**OLD MAILING ADDRESS:**

**NEW MAILING ADDRESS:**

Please circle each type of account you are changing:

**MOTOR VEHICLES**

**REAL ESTATE/SEWER**

**BUSINESS TAX  
(BUSINESS NAME REQUIRED)**

**REAL ESTATE/SEWER Property Address location:**

**RELATIONSHIP TO OWNER:**

**PHONE NUMBER:**

**DATE:**

**SIGNATURE:**

**Email Addresses:**

[t.guild@cityofshelton.org](mailto:t.guild@cityofshelton.org)

[l.theroux@cityofshelton.org](mailto:l.theroux@cityofshelton.org)

[m.gariglio@cityofshelton.org](mailto:m.gariglio@cityofshelton.org)

[s.balcarcel@shelton-ct.gov](mailto:s.balcarcel@shelton-ct.gov)