



**MADISON COUNTY AUDITOR'S OFFICE**  
**ANDERSON, INDIANA**

*Rick Gardner, Auditor*

**CHANGE OF MAILING ADDRESS FORM**

I am the property owner or Power of Attorney as indicated below regarding the following real estate record (s):

**STATE PARCEL NUMBER**

**PROPERTY ADDRESS**

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

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

I am requesting the Auditor of Madison County to change the mailing address of property (ies) listed above to:

Name \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Is this mailing address your primary residence? Yes \_\_\_\_\_ No \_\_\_\_\_  
(By checking yes to the above question, certain exemptions may be removed from the former property)  
Please contact our office at (765) 641-9422 if you have any questions.

Phone Number \_\_\_\_\_

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Title other than Owner \_\_\_\_\_  
(If Personal Representative or POA, please submit designating documentation)

**PLEASE RETURN THIS FORM TO:**

**Madison County Auditor's Office, % Sue Barth, 16 E. 9<sup>TH</sup> St., Anderson, IN 46016 or  
sbarth@madisoncounty.in.gov**