

## **Change of Address Form**

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So that we may serve you better, please provide the correct mailing address for the bill. Please print this form and

### **Mail your response to:**

**Tax Collector – Arthur Thompson  
Town of Deep River  
P.O. Box 13  
Deep River, CT 06417**

**Property  
Location:** \_\_\_\_\_

**Owner:** \_\_\_\_\_

**Mailing  
Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip  
Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

*Arthur Thompson, Tax Collector*