

TOWN OF CANTERBURY

ANGEL JOHNSTONE, CCMA II ASSESSOR

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Please change the mailing address for the listed propertibilling purposes.	ies to the address as shown below for tax and
Owner Name	
If POA, Fiduciary, Trustee or other legal representative, p to make changes to the account.	please include document showing authorization
Signature	Date
*Property Location(s):	

*If address no street number assigned, please use Acct # or Map Block Lot as reference.