

CHANGE OF ADDRESS FORM

PARCEL ID (S) _____

CITY/TOWNSHIP/BORO _____

PROPERTY OWNER'S NAME:

OLD ADDRESS:

NEW/CORRECTED ADDRESS:

Mandatory _____

PHONE # _____

Mandatory _____

EMAIL ADDRESS: _____

Pursuant to passage by the General Assembly and Executive Action signed into law by Governor Josh Shapiro July 20, 2026, **all property owners must submit primary contact information** to respective county Assessment Offices *within 30 days of purchase, transfer, or address change*. The information remains private for official use only, and is curated/maintained by the Chief Assessor/Director of Assessment of each county.
Supplying intentionally-misguiding information, or intentional avoidance of the statute, may result in penalties up to \$500.00.

(Explain)

Relationship to the property owner (circle one)

PROPERTY OWNER ☐

ATTORNEY ☐

POWER OF ATTORNEY ☐

OTHER ☐

REASON FOR CHANGE _____

Print name

Signature

Date

Please return to: Lawrence County Assessment Office
430 Court St Street
New Castle, PA 16101

OFFICE USE ONLY:

OFFICE

EMPLOYEE

DATE

CHECK HOMESTEAD INFORMATION