



CITY OF CAMDEN
OFFICE OF ASSESSMENTS
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assessor@ci.camden.nj.us

Request for Change of Address

Date: _____

Block: _____ Lot: _____ Qualifier: _____

Property Location: _____

Property Owner: _____

New Mailing Address: _____

Contact Information:

Phone No: _____

Email Address: _____

*Reason for Change: _____

Photo ID is required

Provide Photo ID Here

Additional documentation required for LLCs, Corporations and Businesses:
Business Registration