



**Town of Little Compton
Office of the Tax Assessor
Post Office Box 226
Little Compton, Rhode Island 02837
(401) 635-4509**

CHANGE OF ADDRESS REQUEST

Name of Owner(s) _____

Account Number(s) _____

Plat(s) _____ & Lot(s) _____

Automobile(s) _____

CURRENT ADDRESS:

E-Mail: _____
Home Phone _____
Cell Phone _____

NEW ADDRESS:

SIGNATURE: _____

DATE: _____

(Must be signed by owner of record or legal representative)

**e-mail acouto@littlecomptonri.org
or dcosgrove@littlecomptonri.org**

FOR OFFICE USE ONLY

CHANGE MADE BY _____ **DATE** _____