

CITY HALL  
106 DORMAN STREET  
HARRINGTON, DE 19952



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**CHANGE OF ADDRESS REQUEST**  
*(requests can only be made by owner of the property)*

UTILITY ACCOUNT NO.: \_\_\_\_\_  
TAX MAP NUMBER: \_\_\_\_\_

**CURRENT INFORMATION:**

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_

**CHANGES:**

NAME\*: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_  
EMAIL(*optional*): \_\_\_\_\_  
  
DATE: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_

*\*Form must be accompanied by a copy of a state or federally issued photo ID with signature.*