# TOWN OF HILL, NH
# RECORD CHANGE REQUEST

**1. INDICATE CHANGE DESIRED (circle): NAME ADDRESS BOTH OTHER_____**

**2. PRINT information as it NOW APPEARS on your current documents:**

| | | | |
|---|---|---|---|
| 1. LAST NAME (including suffix if any) | FIRST NAME | FULL MIDDLE NAME | |
| 2. RESIDENCE ADDRESS (Street & House/Apt. #) | TOWN OR CITY | ZIP CODE | |
| 3. MAILING ADDRESS (If different from above) | TOWN OR CITY | ZIP CODE | |
| 4. PROPERTY MAP/LOT NUMBER | | | |

**3. PRINT only NEW or CHANGED INFORMATION. (Note that this request will change data on all Town of Hill records):**

| | | | |
|---|---|---|---|
| 1. LAST NAME (including suffix if any) | FIRST NAME | FULL MIDDLE NAME | |
| 2. RESIDENCE ADDRESS (Street & House/Apt. #) | TOWN OR CITY | ZIP CODE | |
| 3. MAILING ADDRESS (If different from above) | TOWN OR CITY | ZIP CODE | |

**4. REASON FOR CHANGE:** _____

**5. SIGNATURE:** _____ **DATE:**_____

Signed under penalty of unsworn falsification pursuant to RSA 641:3

**FILL IN FORM AS REQUIRED**

**RETURN ENTIRE FORM TO:**

TOWN OF HILL NH
30 CRESCENT STREET
SUITE 2
HILL, NH 03243

| Town Use Only | | |
|---|---|---|
| | Received by: | Date Received: |

TOWN OF HILL
30 CRESCENT ST., STE 2
HILL, NH 03243

COPIES TO: 1) Town Clk 2)Selectmen/Assessing 3)Cklist Maintenance 4)Water Dept