

**CHANGE OF NAME FORM DUE TO MARRIAGE/DIVORCE/OTHER**



**PLEASE FILL OUT & RETURN TO:**  
**Newaygo County Equalization Department**  
P.O. Box 885 • 1087 Newell Street  
White Cloud, MI 49349-0885  
(231) 689-7244 phone. (231) 689-7032 fax  
Email: nicoleh@newaygocountymi.gov

Parcel Number(s):

**PREVIOUS NAME:**  
(Please print)

**NEW NAME:**  
(Please print)

I understand that the above information was changed by my request for taxing purposes only,  
and that it does not guarantee any title accuracy.

Taxpayer's Signature:

Date:

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