

POTTER COUNTY ASSESSMENT OFFICE
1 NORTH MAIN STREET, SUITE 111
COUDERSPORT, PA 16915
PHONE (814) 274-0517 FAX (814) 274-3358

CHANGE OF OCCUPATION NOTIFICATION

NAME _____ PHONE NUMBER _____

MAILING ADDRESS

MUNICIPALITY (BOROUGH OR TOWNSHIP) _____

PLEASE CHECK APPROPRIATE BOX

- | | | | | | |
|--------------------------|-------------------|--------------------------|------------|--------------------------|----------|
| <input type="checkbox"/> | FULL TIME | <input type="checkbox"/> | PART TIME | <input type="checkbox"/> | STUDENT |
| <input type="checkbox"/> | RETIRED | <input type="checkbox"/> | UNEMPLOYED | <input type="checkbox"/> | DISABLED |
| <input type="checkbox"/> | OVER 80 YEARS OLD | | | | |

IF YOU CHECKED FULL TIME OR PART TIME, PLEASE PROVIDE JOB TITLE BELOW

SIGNATURE

DATE

PLEASE MAIL OR FAX COMPLETED FORM TO THE ASSESSMENT OFFICE