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Gettysburg Office
240 West Street
Gettysburg, PA 17325
Phone (717) 334-4000
Fax (717) 337-2565
email: info@yatb.com

NEW RESIDENT/CHANGE OF ADDRESS FORM

Name of Taxpayer A: _____

Taxpayer A Social Security Number: _____

Name of Taxpayer B: _____

Taxpayer B Social Security Number: _____

CURRENT ADDRESS INFO:

Date of Move: _____

Street Address (must include house number): _____

_____ P.O. Box (if used): _____

City, State, Zip: _____

Phone: _____ Email: _____

FORMER ADDRESS INFO:

Street Address (must include house number): _____

_____ P.O. Box (if used): _____

City, State, Zip: _____

(Mail or fax the completed form to the address above.)