

CAMDEN COUNTY BOARD OF TAXATION INTER-AGENCY FORM

Form to be used for ownership and mailing address access
Between governmental inter-agencies

To be filed by the Assessor – File this Form with the Camden County Board of Taxation

MUNICIPALITY: _____

ASSESSOR: _____

INTER-AGENCY: _____

Purpose of the List: _____

Inter-Agency Contact:

Name: _____ Email: _____ Phone: _____

(ex. Municipal, county, or state offices, municipal and county utility billing departments, government services contractor(s))

Requested format of Information (please select one):

Frequency of access (please select one):

_____ PDF Report

_____ Annually

_____ Text File (indicate requested delimiter)

_____ Quarterly

_____ Dat File Link

_____ Monthly

_____ Excel Spreadsheet

_____ As Needed

Preferred delivery of requested List:

_____ Email: _____

_____ U.S. Mail: _____

_____ Pick-Up at County Board Office

For County Use ONLY

Date Request Received: _____ / _____ / _____

Date Request Answered: _____ / _____ / _____

Delivery:

_____ Email

_____ Mail

_____ Pick-up

County Information Officer: _____