

Report an Address Change

Please provide all the information you can regarding an address change. This information will be used to update our case file which will reduce the chances of an interruption in child support payments. All new information will be subject to verification.

Please print this form and send to: DCF-Office of Child Support, Customer Service Unit, 103 South Main Street, Waterbury VT 05671-1901, fax to 802-244-1483 or call our Customer Support at 1-800-786-3214.

Thank you in advance for your cooperation.

General Information

Parent Name

First: _____ *Middle:* _____ *Last:* _____

Social Security Number: _____ - _____ - _____

Personal Identification Number (PIN): _____

Old Home Address

Physical Address (street name and #):

Mailing Address (PO Box or RR #):

City: _____

State: _____

Zip Code: _____

Phone: (____) _____ - _____

New Home Address

Physical Address (street name and #):

Mailing Address (PO Box or RR #):

City: _____

State: _____

Zip Code: _____

Phone: (____) _____ - _____

Effective Date of New Address: ____/____/____ (MM/DD/YYYY)

Other Information: *(please provide any other information you think may be relevant or helpful)*
