

NOTIFICATION OF CHANGE OF ADDRESS

Assessment No	Property Address	Owner/s Name/s
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

NEW ADDRESS DETAILS	
Residential Address	New Postal Address
_____	_____
_____	_____
_____	_____
_____	_____

THIS CHANGE APPLIES TO		
All Council correspondence	YES	NO
Rates Only	YES	NO
Water Accounts Only	YES	NO

CONTACT DETAILS	
Phone No (W) _____	(H) _____
Mobile _____	
Email _____	

CHANGE OF ADDRESS NOTIFIED BY	
Full Name _____	
Signature _____	Date ____/____/____
Owner OR	
Other please specify _____	

PRIVACY & PERSONAL INFORMATION PROTECTION ACT
Personal information provided to Council is subject to this ACT (PIIP Act 1998). Personal information will only be used for Council's reporting, business needs & related procedures.