Change of **Address Form**



Please note you must be the owner of the property to change the address

Owner 1			
Surname	Given Names		
Phone (Mobile)	Phone (Home)		
Phone (Work)	Email		
Owner 2			
Surname	Given Names		
Phone (Mobile)	Phone (Home)		
Phone (Work)	Email		
New Postal Address			
Street			
Suburb	State	Postcode	
Please list all the properties that require changing If you do not wish all owners to be changed please advise details f		a separate sheet.	
Assessment No 1	Assessment No 2		
Assessment No 3	Assessment No 4		
When would you like the City to update your details?	Effective date		
Do you have any animals (Cat & Dog) registered with the City?	Yes	No	
Would you like these records updated?	Yes	No	
Do you claim a Pensioner/Senior Rebate on the property? *If yes, you must contact the Water Corporation on 1300 659 951 to register y	Yes* your new property.	No	
Signature	Date signed		

Office Use Only

Date Received Received by

Assessment Number Action Officer