

**CHANGE OF ADDRESS FORM**

**ASSESSMENT NUMBER:** \_\_\_\_\_

**OWNERS NAME:** \_\_\_\_\_

**OLD ADDRESS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NEW ADDRESS DETAILS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PHONE:**

**Home:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

<b>Office Use Only:</b>
<b>Date:</b>
<b>Signature:</b>
<b>Memo:</b>