



Change of Address/Name Form

Property/Location

Address: _____

Customer Reference Number: _____ Date: _____

Owner/s Name/s: _____

(Change of Name due to marriage/divorce requires a copy of Marriage Certificate and/or Drivers Licence)

Residential Address: _____

Postal Address: *(If different from residential)* _____

If you have additional properties (other than the above nominated) do you wish to amend the postal address for these?

YES *(Please amend all my properties)* NO *(The changes ONLY relate to this property)*

Occupier/s Full Names: _____

(Only if nominated as a ratepayer/s) _____

Reason/s For Requesting Change: _____

Signature: _____ Please Print Name: _____

Phone Number: H) _____ B) _____ M) _____

Officer Signature: _____

PRIVACY STATEMENT

Greater Shepparton City Council collects personal information for the purposes of carrying out its functions and facilitating the operations of various other Acts of Parliament, including the Fences Act 1968. We may disclose this information, where required, to our contractors, registered valuers, adjoining owners or where there is legislative requirement.