

CHANGE OF OWNERSHIP OR ADDRESS FORM

PLEASE COMPLETE ***ALL*** INFORMATION BELOW

|  |  |
| --- | --- |
| Assessment No: | Owner Code: |
| Names in Full: |
| Property Address: |
| Postal Address: |
| Email Address: |
| Phone No: | Date: |
| Signed: ***(All owners must sign)******1)*** | ***2)*** |